

Fill in this information to identify your case:

United States Bankruptcy Court for the:

DISTRICT OF MASSACHUSETTS

Case number (if known) Chapter 7

☐ Check if this an amended filing

Official Form 201

Voluntary Petition for Non-Individuals Filing for Bankruptcy

4/16

If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and case number (if known). For more information, a separate document, *Instructions for Bankruptcy Forms for Non-Individuals*, is available.

1. Debtor's name Epirus Biopharmaceuticals, Inc.

2. All other names debtor used in the last 8 years

Include any assumed names, trade names and doing business as names

3. Debtor's federal Employer Identification Number (EIN) 04-3514457

4. Debtor's address Principal place of business Mailing address, if different from principal place of business

699 Boylston Street
Eighth Floor
Boston, MA 02116

Number, Street, City, State & ZIP Code

Suffolk
County

P.O. Box, Number, Street, City, State & ZIP Code

Location of principal assets, if different from principal place of business

Number, Street, City, State & ZIP Code

5. Debtor's website (URL) epirusbiopharma.com

6. Type of debtor

☒ Corporation (including Limited Liability Company (LLC) and Limited Liability Partnership (LLP))

☐ Partnership (excluding LLP)

☐ Other. Specify:

Debtor **Epirus Biopharmaceuticals, Inc.**
Name

Case number (if known)

7. Describe debtor's business

A. Check one:

- ☐ Health Care Business (as defined in 11 U.S.C. § 101(27A))
- ☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))
- ☐ Railroad (as defined in 11 U.S.C. § 101(44))
- ☐ Stockbroker (as defined in 11 U.S.C. § 101(53A))
- ☐ Commodity Broker (as defined in 11 U.S.C. § 101(6))
- ☐ Clearing Bank (as defined in 11 U.S.C. § 781(3))
- ☒ None of the above

B. Check all that apply

- ☐ Tax-exempt entity (as described in 26 U.S.C. §501)
- ☐ Investment company, including hedge fund or pooled investment vehicle (as defined in 15 U.S.C. §80a-3)
- ☐ Investment advisor (as defined in 15 U.S.C. §80b-2(a)(11))

C. NAICS (North American Industry Classification System) 4-digit code that best describes debtor.

See <http://www.uscourts.gov/four-digit-national-association-naics-codes>.
6215

8. Under which chapter of the Bankruptcy Code is the debtor filing?

Check one:

- ☒ Chapter 7
- ☐ Chapter 9
- ☐ Chapter 11. Check all that apply:

- ☐ Debtor's aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$2,566,050 (amount subject to adjustment on 4/01/19 and every 3 years after that).
- ☐ The debtor is a small business debtor as defined in 11 U.S.C. § 101(51D). If the debtor is a small business debtor, attach the most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if all of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).
- ☐ A plan is being filed with this petition.
- ☐ Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).
- ☐ The debtor is required to file periodic reports (for example, 10K and 10Q) with the Securities and Exchange Commission according to § 13 or 15(d) of the Securities Exchange Act of 1934. File the *attachment to Voluntary Petition for Non-Individuals Filing for Bankruptcy under Chapter 11* (Official Form 201A) with this form.
- ☐ The debtor is a shell company as defined in the Securities Exchange Act of 1934 Rule 12b-2.

☐ Chapter 12

9. Were prior bankruptcy cases filed by or against the debtor within the last 8 years?

- ☒ No.
- ☐ Yes.

If more than 2 cases, attach a separate list.

District	_____	When	_____	Case number	_____
District	_____	When	_____	Case number	_____

10. Are any bankruptcy cases pending or being filed by a business partner or an affiliate of the debtor?

- ☒ No
- ☐ Yes.

List all cases. If more than 1, attach a separate list

Debtor	_____	Relationship	_____
District	_____	When	_____
		Case number, if known	_____

Debtor **Epirus Biopharmaceuticals, Inc.**
Name

Case number (if known)

11. Why is the case filed in this district?

Check all that apply:

- ☒ Debtor has had its domicile, principal place of business, or principal assets in this district for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other district.
- ☐ A bankruptcy case concerning debtor's affiliate, general partner, or partnership is pending in this district.

12. Does the debtor own or have possession of any real property or personal property that needs immediate attention?

☒ No

☐ Yes. Answer below for each property that needs immediate attention. Attach additional sheets if needed.

Why does the property need immediate attention? (Check all that apply.)

☐ It poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety.

What is the hazard?

☐ It needs to be physically secured or protected from the weather.

☐ It includes perishable goods or assets that could quickly deteriorate or lose value without attention (for example, livestock, seasonal goods, meat, dairy, produce, or securities-related assets or other options).

☐ Other

Where is the property?

Number, Street, City, State & ZIP Code

Is the property insured?

☐ No

☐ Yes. Insurance agency

Contact name

Phone

Statistical and administrative information

13. Debtor's estimation of available funds

Check one:

☐ Funds will be available for distribution to unsecured creditors.

☒ After any administrative expenses are paid, no funds will be available to unsecured creditors.

14. Estimated number of creditors

☐ 1-49

☒ 50-99

☐ 100-199

☐ 200-999

☐ 1,000-5,000

☐ 5001-10,000

☐ 10,001-25,000

☐ 25,001-50,000

☐ 50,001-100,000

☐ More than 100,000

15. Estimated Assets

☐ \$0 - \$50,000

☐ \$50,001 - \$100,000

☐ \$100,001 - \$500,000

☒ \$500,001 - \$1 million

☐ \$1,000,001 - \$10 million

☐ \$10,000,001 - \$50 million

☐ \$50,000,001 - \$100 million

☐ \$100,000,001 - \$500 million

☐ \$500,000,001 - \$1 billion

☐ \$1,000,000,001 - \$10 billion

☐ \$10,000,000,001 - \$50 billion

☐ More than \$50 billion

16. Estimated liabilities

☐ \$0 - \$50,000

☐ \$50,001 - \$100,000

☐ \$100,001 - \$500,000

☐ \$500,001 - \$1 million

☐ \$1,000,001 - \$10 million

☒ \$10,000,001 - \$50 million

☐ \$50,000,001 - \$100 million

☐ \$100,000,001 - \$500 million

☐ \$500,000,001 - \$1 billion

☐ \$1,000,000,001 - \$10 billion

☐ \$10,000,000,001 - \$50 billion

☐ More than \$50 billion

Debtor **Epirus Biopharmaceuticals, Inc.**
Name

Case number (if known)

Request for Relief, Declaration, and Signatures

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

**17. Declaration and signature
of authorized
representative of debtor**

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

I have been authorized to file this petition on behalf of the debtor.

I have examined the information in this petition and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on **July 25, 2016**
MM / DD / YYYY

X /s/ Robert Ticktin

Signature of authorized representative of debtor

Robert Ticktin

Printed name

Title **SVP, General Counsel & Corporate
Secretary**

18. Signature of attorney

X /s/ Daniel S. Bleck

Signature of attorney for debtor

Date **July 25, 2016**

MM / DD / YYYY

Daniel S. Bleck

Printed name

Mintz, Levin, Cohn, Ferris, Glovsky and Popeo, P.C.

Firm name

**One Financial Center
38th Floor
Boston, MA 02111**

Number, Street, City, State & ZIP Code

Contact phone **617-348-4498**

Email address **dbleck@mintz.com**

560328 MA

Bar number and State

Fill in this information to identify the case:

Debtor name Epirus Biopharmaceuticals, Inc.

United States Bankruptcy Court for the: DISTRICT OF MASSACHUSETTS

Case number (if known) _____

☐ Check if this is an amended filing

Official Form 202

Declaration Under Penalty of Perjury for Non-Individual Debtors

12/15

An individual who is authorized to act on behalf of a non-individual debtor, such as a corporation or partnership, must sign and submit this form for the schedules of assets and liabilities, any other document that requires a declaration that is not included in the document, and any amendments of those documents. This form must state the individual's position or relationship to the debtor, the identity of the document, and the date. Bankruptcy Rules 1008 and 9011.

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Declaration and signature

I am the president, another officer, or an authorized agent of the corporation; a member or an authorized agent of the partnership; or another individual serving as a representative of the debtor in this case.

I have examined the information in the documents checked below and I have a reasonable belief that the information is true and correct:

- ☒ *Schedule A/B: Assets—Real and Personal Property* (Official Form 206A/B)
- ☒ *Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 206D)
- ☒ *Schedule E/F: Creditors Who Have Unsecured Claims* (Official Form 206E/F)
- ☒ *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G)
- ☒ *Schedule H: Codebtors* (Official Form 206H)
- ☒ *Summary of Assets and Liabilities for Non-Individuals* (Official Form 206Sum)
- ☐ Amended Schedule _____
- ☐ Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders (Official Form 204)
- ☐ Other document that requires a declaration _____

I declare under penalty of perjury that the foregoing is true and correct.

Executed on July 25, 2016

X /s/ Robert Ticktin

Signature of individual signing on behalf of debtor

Robert Ticktin

Printed name

SVP, General Counsel & Corporate Secretary

Position or relationship to debtor

Fill in this information to identify the case:

Debtor name Epirus Biopharmaceuticals, Inc.

United States Bankruptcy Court for the: DISTRICT OF MASSACHUSETTS

Case number (if known) _____

☐ Check if this is an amended filing

Official Form 206Sum
Summary of Assets and Liabilities for Non-Individuals

12/15

Part 1: Summary of Assets

1. **Schedule A/B: Assets-Real and Personal Property** (Official Form 206A/B)

1a. **Real property:**

Copy line 88 from *Schedule A/B*..... \$ **0.00**

1b. **Total personal property:**

Copy line 91A from *Schedule A/B*..... \$ **672,004.17**

1c. **Total of all property:**

Copy line 92 from *Schedule A/B*..... \$ **672,004.17**

Part 2: Summary of Liabilities

2. **Schedule D: Creditors Who Have Claims Secured by Property** (Official Form 206D)

Copy the total dollar amount listed in Column A, *Amount of claim*, from line 3 of *Schedule D*..... \$ **3,695,823.36**

3. **Schedule E/F: Creditors Who Have Unsecured Claims** (Official Form 206E/F)

3a. **Total claim amounts of priority unsecured claims:**

Copy the total claims from Part 1 from line 5a of *Schedule E/F*..... \$ **0.00**

3b. **Total amount of claims of nonpriority amount of unsecured claims:**

Copy the total of the amount of claims from Part 2 from line 5b of *Schedule E/F*..... +\$ **6,663,388.27**

4. **Total liabilities**
Lines 2 + 3a + 3b

\$ **10,359,211.63**

Fill in this information to identify the case:Debtor name Epirus Biopharmaceuticals, Inc.United States Bankruptcy Court for the: DISTRICT OF MASSACHUSETTS

Case number (if known) _____

☐ Check if this is an amended filing**Official Form 206A/B****Schedule A/B: Assets - Real and Personal Property**

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Disclose all property, real and personal, which the debtor owns or in which the debtor has any other legal, equitable, or future interest. Include all property in which the debtor holds rights and powers exercisable for the debtor's own benefit. Also include assets and properties which have no book value, such as fully depreciated assets or assets that were not capitalized. In Schedule A/B, list any executory contracts or unexpired leases. Also list them on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G).

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. At the top of any pages added, write the debtor's name and case number (if known). Also identify the form and line number to which the additional information applies. If an additional sheet is attached, include the amounts from the attachment in the total for the pertinent part.

For Part 1 through Part 11, list each asset under the appropriate category or attach separate supporting schedules, such as a fixed asset schedule or depreciation schedule, that gives the details for each asset in a particular category. List each asset only once. In valuing the debtor's interest, do not deduct the value of secured claims. See the instructions to understand the terms used in this form.

Part 1: Cash and cash equivalents**1. Does the debtor have any cash or cash equivalents?**

- ☐ No. Go to Part 2.
☒ Yes Fill in the information below.

All cash or cash equivalents owned or controlled by the debtor**Current value of debtor's interest****3. Checking, savings, money market, or financial brokerage accounts (Identify all)**

Name of institution (bank or brokerage firm)

Type of account

Last 4 digits of account number

3.1. Bank of America Full Business ChkgChecking Account-995\$79,273.103.2. Bank of America Block Pending
Depository AC # -9019\$0.003.3. Bank of America Full Business Chkg
Depository AC # -4767\$0.003.4. Bank of America Money Market
Collateral A/C # -9087\$0.00**4. Other cash equivalents (Identify all)****5. Total of Part 1.**

Add lines 2 through 4 (including amounts on any additional sheets). Copy the total to line 80.

\$79,273.10**Part 2: Deposits and Prepayments****6. Does the debtor have any deposits or prepayments?**

- ☐ No. Go to Part 3.
☒ Yes Fill in the information below.

Debtor **Epirus Biopharmaceuticals, Inc.** Case number (If known) _____
Name

7. **Deposits, including security deposits and utility deposits**

Description, including name of holder of deposit

7.1. **Security deposit re: CPT ONE EXETER PLAZA, LLC Lease dated March, 2013, as Amended.** **\$41,702.42**

8. **Prepayments, including prepayments on executory contracts, leases, insurance, taxes, and rent**

Description, including name of holder of prepayment

8.1. **Prepaid General Commercial Liability Insurance** **\$21,498.17**

8.2. **Prepaid Dues with ZenQMS, Definitive Healthcare, Mass Biotech Counsel - Dues, and Nasdaq** **\$32,798.72**

8.3. **Prepaid Service Contracts with E-Trade, Computershare , RSM and IPREO** **\$28,722.36**

8.4. **Prepaid Adaptive Software 2016 12 mo. Subscription** **\$9,685.00**

8.5. **Prepaid Consumables Fuji Manufacturing** **\$435,000.00**

8.6. **Wind Down Funds held by Verdolino & Lowey P.C.** **\$23,324.40**

9. **Total of Part 2.**

Add lines 7 through 8. Copy the total to line 81.

\$592,731.07

Part 3: Accounts receivable

10. **Does the debtor have any accounts receivable?**

- ☒ No. Go to Part 4.
☐ Yes Fill in the information below.

Part 4: Investments

13. **Does the debtor own any investments?**

- ☐ No. Go to Part 5.
☒ Yes Fill in the information below.

**Valuation method used
for current value**

**Current value of
debtor's interest**

14. **Mutual funds or publicly traded stocks not included in Part 1**
Name of fund or stock:

15. **Non-publicly traded stock and interests in incorporated and unincorporated businesses, including any interest in an LLC, partnership, or joint venture**

Debtor Epirus Biopharmaceuticals, Inc. Case number (If known) _____

Name

Name of entity:

% of ownership

15.1. Epirus Pharmaceuticals (Switzerland) GmbH, subsidiary with a principal place of business at General Guisan- Strasse 6, 6303, Zug Switzerland 100 % Unknown

15.2. Epirus Biopharmaceuticals Ltd., UK Corp. subsidiary with a principal place of business at 11 Old Jewry, 7th Floor, London EC2R 8DU 100 % Unknown

15.3. Epirus Brasil Tecnologia Ltda, Brazil Corp. subsidiary with a principal place of business at Avenida Bernardino de Campos, 98 - 6 Andar Para so, S o Paulo 04004-040 BR 100 % Unknown

15.4. EBSUB, Inc. subsidiary with a principal place of business at 699 Boylston Street 8th Floor, Boston, MA 02116 100 % Unknown

15.5. Minority share interest in Cluster40 Therapeutics B.V., Yalelaan 46 3584 CM, Utrecht, NETHERLANDS 10 % Unknown

15.6. Minority share interest in Cluster152 Therapeutics B.V., Yalelaan 46 3584 CM, Utrecht, NETHERLANDS 10 % Unknown

15.7. Minority share interest in Cluster270 Therapeutics B.V., Yalelaan 46 3584 CM, Utrecht, NETHERLANDS 5 % Unknown

15.8. Minority share interest in Cluster279 Therapeutics B.V., Yalelaan 46 3584 CM, Utrecht, NETHERLANDS 10 % Unknown

16. **Government bonds, corporate bonds, and other negotiable and non-negotiable instruments not included in Part 1**
Describe:

17. **Total of Part 4.**

Add lines 14 through 16. Copy the total to line 83.

\$0.00

Part 5: Inventory, excluding agriculture assets

18. **Does the debtor own any inventory (excluding agriculture assets)?**

- ☒ No. Go to Part 6.
☐ Yes Fill in the information below.

Part 6: Farming and fishing-related assets (other than titled motor vehicles and land)

27. **Does the debtor own or lease any farming and fishing-related assets (other than titled motor vehicles and land)?**

- ☒ No. Go to Part 7.
☐ Yes Fill in the information below.

Debtor Epirus Biopharmaceuticals, Inc. Case number (If known) _____
Name

Part 7: Office furniture, fixtures, and equipment; and collectibles

38. Does the debtor own or lease any office furniture, fixtures, equipment, or collectibles?

- ☐ No. Go to Part 8.
☒ Yes Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
39. Office furniture			
40. Office fixtures			
41. Office equipment, including all computer equipment and communication systems equipment and software			
Net book value of Computer Equipment	\$103,263.11	Recent cost	Unknown
Net book value of Furniture & Fixtures	\$101,662.35	Recent cost	Unknown

42. **Collectibles** Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; china and crystal; stamp, coin, or baseball card collections; other collections, memorabilia, or collectibles

43. Total of Part 7.

Add lines 39 through 42. Copy the total to line 86.

\$0.00

44. Is a depreciation schedule available for any of the property listed in Part 7?

- ☐ No
☒ Yes

45. Has any of the property listed in Part 7 been appraised by a professional within the last year?

- ☒ No
☐ Yes

Part 8: Machinery, equipment, and vehicles

46. Does the debtor own or lease any machinery, equipment, or vehicles?

- ☒ No. Go to Part 9.
☐ Yes Fill in the information below.

Part 9: Real property

54. Does the debtor own or lease any real property?

- ☒ No. Go to Part 10.
☐ Yes Fill in the information below.

Part 10: Intangibles and intellectual property

59. Does the debtor have any interests in intangibles or intellectual property?

- ☐ No. Go to Part 11.
☒ Yes Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
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Debtor Epirus Biopharmaceuticals, Inc. Case number (If known) _____

Name

60. Patents, copyrights, trademarks, and trade secrets
"EPIRUS Biopharmaceuticals". "in Market, For
Market", "SCALE", and "Infimab" registered
trademarks Unknown Unknown

61. Internet domain names and websites
Epirus.com domain name \$0.00 Unknown

62. Licenses, franchises, and royalties
 63. Customer lists, mailing lists, or other compilations
 64. Other intangibles, or intellectual property
Net book value of Intangible R&D Asset \$2,151,359.00 Unknown

65. Goodwill
Goodwill \$15,626,274.00 Unknown

66. Total of Part 10. \$0.00
 Add lines 60 through 65. Copy the total to line 89.

67. Do your lists or records include personally identifiable information of customers (as defined in 11 U.S.C. §§ 101(41A) and 107?)
☒ No
☐ Yes

68. Is there an amortization or other similar schedule available for any of the property listed in Part 10?
☒ No
☐ Yes

69. Has any of the property listed in Part 10 been appraised by a professional within the last year?
☒ No
☐ Yes

Part 11: All other assets

70. Does the debtor own any other assets that have not yet been reported on this form?
 Include all interests in executory contracts and unexpired leases not previously reported on this form.

☐ No. Go to Part 12.
☒ Yes Fill in the information below.

Current value of
debtor's interest

71. Notes receivable
 Description (include name of obligor)

72. Tax refunds and unused net operating losses (NOLs)
 Description (for example, federal, state, local)
U.S. federal net operating loss carryforwards of
approximately \$38.8 million, which may be available to
offset future income tax liabilities and expire at various
dates through 2035. Tax year 2015 Unknown

Debtor Epirus Biopharmaceuticals, Inc. Case number (If known) _____
Name

U.S. federal net operating loss carryforwards of approximately \$31.0 million, which may be available to offset future income tax liabilities and expire at various dates through 2035.

Tax year 2014 Unknown

State net operating loss carryforwards of approximately \$27.6 million and \$21.3 million, respectively, which may be available to offset future income tax liabilities and expire at various dates through 2035.

Tax year 2015 Unknown

State net operating loss carryforwards of approximately \$21.3 million, which may be available to offset future income tax liabilities and expire at various dates through 2035.

Tax year 2014 Unknown

Foreign net operating loss carryforwards of approximately \$82 million, which may be available to offset future income tax liabilities.

Tax year 2015 Unknown

Foreign net operating loss carryforwards of approximately \$145 million, which may be available to offset future income tax liabilities.

Tax year 2014 Unknown

73. **Interests in insurance policies or annuities**
Commercial Package Federal Insurance Company
36019217 06/14/2016 to 06/14/2017 Unknown

Product Liability
Includes Clinical Trial Liability Gemini Insurance
Company GL126272 06/14/2015 to 07/11/2016 Unknown

Workers Compensation Chubb Group 71744887
06/14/2016 to 06/14/2017 Unknown

International Package Chubb Group 99492309
06/14/2016 to 06/14/2017 Unknown

Comm. Umbrella Excess Federal Insurance Company
79890076 06/14/2016 to 06/14/2017 Unknown

Public Co. D & O Liability - MASTER U.S. Specialty
Insurance Company 14-MGU-15-A35309 07/15/2015 to
07/29/2016 Unknown

Public Co. D & O Liability XL Specialty Insurance
Company ELU140059-15 07/15/2015 to 07/29/2016 Unknown

Public Co. D & O Liability National Union Fire Ins. Co.
01-546-64-76 07/15/2015 to 07/29/2016 Unknown

Debtor	Epirus Biopharmaceuticals, Inc. Name	Case number (If known)
	Public Co. D & O Liability Berkley Insurance Co. #18015351 07/15/2015 to 07/29/2016	Unknown
	EPL and Fiduciary Liability Federal Insurance Company 82410241 07/15/2015 to 07/15/2016	Unknown
	Public Co. D & O Liability - Local Swiss U.S. Specialty Insurance Company 14G140520000 07/15/2015 to 07/29/2016	Unknown
	"Supply Chain" - Worldwide Transportation, Property at Other Premises, Worldwide Terrorism Underwriters Lloyds MC3965WC3965 (Falvey Cargo) 02/22/2016 to 06/14/2016	Unknown
	Commercial Property -NETHERLANDS Chubb Europe 28324767 11/20/2015 to 07/01/2016	Unknown
	General Liability - NETHERLANDS Chubb Europe 28324768 11/20/2015 to 07/01/2016	Unknown
	Commercial Property - SWITZERLAND Chubb Europe 33220500 11/20/2015 to 07/15/2016	Unknown
	General Liability - SWITZERLAND Chubb Europe 36029986 11/20/2015 to 07/15/2016	Unknown
	Clinical Trials Liability - ARGENTINA Allianz Argentina 16007746428 2/1/2016 to 10/31/2018	Unknown
	Clinical Trials Liability CHILE BCI Seguros Generales 7668 2/1/2016 to 10/31/2018	Unknown
	Clinical Trials Liability - COLOMBIA Allianz Colseguros 21898140 2/1/2016 to 10/31/2018	Unknown
	Clinical Trials Liability - GEORGIA Georgian Pension & Insurance CTR13916 2/1/2016 to 10/31/2018	Unknown
	Clinical Trials Liability - GUATEMALA Suegeros G&T SA RCGF-850 2/1/2016 to 10/31/2018	Unknown
	Clinical Trials Liability - ISRAEL HAREL 661700091516 2/1/2016 to 10/31/2018	Unknown

Debtor Epirus Biopharmaceuticals, Inc. Case number (If known) _____
Name

Clinical Trials Liability -
PERU Rimac International
1201529567 2/1/2016 to 10/31/2018 Unknown

Clinical Trials Liability -
MEXICO Allianz Mexico
RCID/00001098 2/1/2016 to 10/31/2018 Unknown

Clinical Trials Liability -
South Africa Allianz
ZAL000290160 3/1/2016 to 10/31/2018 Unknown

Clinical Trials Liability -
AUSTRALIA Allianz 990005803 LCP 5/1/2016 to 12/1/16 Unknown

74. Causes of action against third parties (whether or not a lawsuit has been filed)

75. Other contingent and unliquidated claims or causes of action of every nature, including counterclaims of the debtor and rights to set off claims
Taro Pharmaceuticals Inc. \$5,000,000 non-interest bearing, limited recourse promissory note with a maturity date of July 1, 2017 re Sale Purchase Agreement dated October 1, 2015 subject to adjustments contained therein. Unknown
Nature of claim Limited Recourse Promissory Note
Amount requested \$5,000,000.00

76. Trusts, equitable or future interests in property

77. Other property of any kind not already listed *Examples:* Season tickets, country club membership
Intercompany receivable balance due from Epirus Pharmaceuticals (Switzerland) GmbH with a book value of \$6,408,235.00 Unknown

78. Total of Part 11.

Add lines 71 through 77. Copy the total to line 90.

\$0.00

79. Has any of the property listed in Part 11 been appraised by a professional within the last year?

☒ No
☐ Yes

Debtor Epirus Biopharmaceuticals, Inc. Case number (If known) _____
Name

Part 12: Summary

In Part 12 copy all of the totals from the earlier parts of the form

Type of property	Current value of personal property	Current value of real property
80. Cash, cash equivalents, and financial assets. <i>Copy line 5, Part 1</i>	\$79,273.10	
81. Deposits and prepayments. <i>Copy line 9, Part 2.</i>	\$592,731.07	
82. Accounts receivable. <i>Copy line 12, Part 3.</i>	\$0.00	
83. Investments. <i>Copy line 17, Part 4.</i>	\$0.00	
84. Inventory. <i>Copy line 23, Part 5.</i>	\$0.00	
85. Farming and fishing-related assets. <i>Copy line 33, Part 6.</i>	\$0.00	
86. Office furniture, fixtures, and equipment; and collectibles. <i>Copy line 43, Part 7.</i>	\$0.00	
87. Machinery, equipment, and vehicles. <i>Copy line 51, Part 8.</i>	\$0.00	
88. Real property. <i>Copy line 56, Part 9.....></i>		\$0.00
89. Intangibles and intellectual property. <i>Copy line 66, Part 10.</i>	\$0.00	
90. All other assets. <i>Copy line 78, Part 11.</i>	\$0.00	
91. Total. Add lines 80 through 90 for each column	\$672,004.17	\$0.00
92. Total of all property on Schedule A/B. Add lines 91a+91b=92		\$672,004.17

Fill in this information to identify the case:

Debtor name Epirus Biopharmaceuticals, Inc.

United States Bankruptcy Court for the: DISTRICT OF MASSACHUSETTS

Case number (if known) _____

☐ Check if this is an amended filing

Official Form 206D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible.

1. Do any creditors have claims secured by debtor's property?

- ☐ No. Check this box and submit page 1 of this form to the court with debtor's other schedules. Debtor has nothing else to report on this form.
- ☒ Yes. Fill in all of the information below.

Part 1: List Creditors Who Have Secured Claims

2. List in alphabetical order all creditors who have secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim.

		Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	
2.1	CPT ONE EXETER PLAZA, LLC <small>Creditor's Name</small> c/o AEW Capital Management, L.P. Two Seaport Lane, World Trade Center Eas Attention: Asset Manager for CPT One Exe Boston, MA 02210 <small>Creditor's mailing address</small> <small>Creditor's email address, if known</small> Date debt was incurred Last 4 digits of account number CPTONEEX Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Specify each creditor, including this creditor and its relative priority.	Describe debtor's property that is subject to a lien Leased office space containing approximately 11,000 square feet on the 8th floor of the building located at 699 Boylston St., Boston MA 02116 Describe the lien Lease dated March, 2013, as Amended Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H) As of the petition filing date, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Unknown	\$41,702.42

2.2	Hercules Technology Growth Capital, Inc. <small>Creditor's Name</small> Legal Department Attn: Chief Legal Officer and Mr. Bryan Jadot 400 Hamilton Avenue, Suite 310 Palo Alto, CA 94301 <small>Creditor's mailing address</small>	Describe debtor's property that is subject to a lien All assets except Intellectual Property Describe the lien Loan and Security Agreement dated Sept. 30, 2014 Is the creditor an insider or related party? <input checked="" type="checkbox"/> No	\$3,695,823.36	Unknown
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Debtor **Epirus Biopharmaceuticals, Inc.**

Case number (if known)

Name

Creditor's email address, if known

☐ Yes

Is anyone else liable on this claim?

Date debt was incurred

☒ No

9/30/2014

☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

Last 4 digits of account number

Do multiple creditors have an interest in the same property?

☒ No

☐ Yes. Specify each creditor, including this creditor and its relative priority.

As of the petition filing date, the claim is:

Check all that apply

☐ Contingent

☐ Unliquidated

☐ Disputed

3. Total of the dollar amounts from Part 1, Column A, including the amounts from the Additional Page, if any.

\$3,695,823.36

Part 2: List Others to Be Notified for a Debt Already Listed in Part 1

List in alphabetical order any others who must be notified for a debt already listed in Part 1. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for secured creditors.

If no others need to be notified for the debts listed in Part 1, do not fill out or submit this page. If additional pages are needed, copy this page.

Name and address

On which line in Part 1 did you enter the related creditor?

Last 4 digits of account number for this entity

Cushman & Wakefield of MA, Inc.
125 Summer Street
Attn: Property Manager for CPT One Exeter
Boston, MA 02210

Line 2.1

Haim Zaltzman
Latham & Watkins LLP
505 Montgomery St.
Suite 2000
San Francisco, CA 94111-6538

Line 2.2

James Sperling, Esq.
Rubin and Rudman LLP
50 Rowes Wharf
Boston, MA 02210

Line 2.1

Fill in this information to identify the case:

Debtor name **Epirus Biopharmaceuticals, Inc.**

United States Bankruptcy Court for the: DISTRICT OF MASSACHUSETTS

Case number (if known) _____

☐ Check if this is an amended filing

Official Form 206E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY unsecured claims and Part 2 for creditors with NONPRIORITY unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

Part 1: List All Creditors with PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims? (See 11 U.S.C. § 507).

☐ No. Go to Part 2.

☒ Yes. Go to line 2.

2. List in alphabetical order all creditors who have unsecured claims that are entitled to priority in whole or in part. If the debtor has more than 3 creditors with priority unsecured claims, fill out and attach the Additional Page of Part 1.

			Total claim	Priority amount
2.1	Priority creditor's name and mailing address Belastingdienst Apeldoorn Laan van Westenenk 490 7334 DS Apeldoorn THE NETHERLANDS	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Unknown	Unknown
	Date or dates debt was incurred Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	Basis for the claim: Taxes Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.2	Priority creditor's name and mailing address Blue Cross Blue Shield MA BOX 371318 Pittsburgh, PA 15250-7318	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Unknown	Unknown
	Date or dates debt was incurred Last 4 digits of account number BCBSMA Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (5)	Basis for the claim: Employee Benefit Plan Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	Epirus Biopharmaceuticals, Inc. <small>Name</small>		Case number (if known)
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2.3	Priority creditor's name and mailing address Canada Revenue Agency Commissioner of Revenue 555 MacKenzie Avenue, 7th Floor Ottawa ON K1A 0L5 CANADA	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Unknown	Unknown
	Date or dates debt was incurred	Basis for the claim: Taxes		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.4	Priority creditor's name and mailing address City of Boston Tax Collector 1 City Hall Plaza Boston, MA 02201	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Unknown	Unknown
	Date or dates debt was incurred	Basis for the claim: Taxes		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.5	Priority creditor's name and mailing address Delaware Franchise Tax State of Delaware Binghamton, NY 13902-5509	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Unknown	Unknown
	Date or dates debt was incurred	Basis for the claim: Taxes		
	Last 4 digits of account number DELAWARE Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.6	Priority creditor's name and mailing address Federal Revenue of Brazil R. Coronel Antonio Botelho de Sousa 31 Maranguape - CE 61940-005 BRAZIL	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Unknown	Unknown
	Date or dates debt was incurred	Basis for the claim: Taxes		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	Epirus Biopharmaceuticals, Inc. Name	Case number (if known)
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2.7	Priority creditor's name and mailing address HM Revenue and Customs Benton Park View Newcastle Upon Tyne NE98 1ZZ UNITED KINGDOM	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Unknown	Unknown
	Date or dates debt was incurred <hr/> Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	Basis for the claim: Taxes <hr/> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.8	Priority creditor's name and mailing address Internal Revenue Service Special Procedures P.O. Box 9112 JFK Building - Stop 20800 Boston, MA 02203	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Unknown	Unknown
	Date or dates debt was incurred <hr/> Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	Basis for the claim: Taxes <hr/> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.9	Priority creditor's name and mailing address Massachusetts Division of Unemployment Assistance 19 Staniford St. 5th Floor Boston, MA 02114-2589	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Unknown	Unknown
	Date or dates debt was incurred <hr/> Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	Basis for the claim: Taxes <hr/> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.10	Priority creditor's name and mailing address Massachusetts DOR Bankruptcy Unit P.O. Box 9564 Boston, MA 02114-9564	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Unknown	Unknown
	Date or dates debt was incurred <hr/> Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	Basis for the claim: Taxes <hr/> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	Epirus Biopharmaceuticals, Inc. Name	Case number (if known)
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2.11	Priority creditor's name and mailing address NY State Dept of Taxation & Finance Bankruptcy Unit P.O. Box 5300 Albany, NY 12205-0300	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Unknown	Unknown
	Date or dates debt was incurred <hr/> Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	Basis for the claim: Taxes Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.12	Priority creditor's name and mailing address NYC DEPARTMENT OF FINANCE P.O. BOX 5070 KINGSTON, NY 12402-5070	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Unknown	Unknown
	Date or dates debt was incurred <hr/> Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	Basis for the claim: Taxes Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.13	Priority creditor's name and mailing address NYS DEPT. OF LABOR - U.I. DIVISON W.A. HARRIMAN STATE CAMPUS ALBANY, NY 12240-0415	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Unknown	Unknown
	Date or dates debt was incurred <hr/> Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	Basis for the claim: Taxes Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.14	Priority creditor's name and mailing address Swiss Federal Tax Administration Eigerstrasse 65 3003 Berne SWITZERLAND	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Unknown	Unknown
	Date or dates debt was incurred <hr/> Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	Basis for the claim: Taxes Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	Epirus Biopharmaceuticals, Inc. Name	Case number (if known)		
2.15	Priority creditor's name and mailing address Swiss Federal Tax Administration Main Division Value Added Tax Schwarztorstrasse 50 3003 Berne SWITZERLAND	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Unknown	Unknown
	Date or dates debt was incurred Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	Basis for the claim: Taxes Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.16	Priority creditor's name and mailing address Tax and Customs Administration/Limburg/D Kloosterweg 22 PO Box 2865 6401 DJ Heerlen THE NETHERLANDS	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Unknown	Unknown
	Date or dates debt was incurred Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	Basis for the claim: Taxes Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.17	Priority creditor's name and mailing address Unum Life Insurance Co. of America PO Box 406990 Atlanta, GA 30384-6990	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Unknown	Unknown
	Date or dates debt was incurred Last 4 digits of account number UNUM Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (5)	Basis for the claim: Employee Benefit Plan Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.18	Priority creditor's name and mailing address VSP P.O. Box 742479 Los Angeles, CA 90074-2479	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Unknown	Unknown
	Date or dates debt was incurred Last 4 digits of account number VSP Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (5)	Basis for the claim: Employee Benefit Plan Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Part 2: List All Creditors with NONPRIORITY Unsecured Claims

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

Amount of claim

Debtor	Epirus Biopharmaceuticals, Inc. <small>Name</small>	Case number (if known) _____
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3.1	Nonpriority creditor's name and mailing address AMERICAN GAS PRODUCT 24 VINE STREET EVERETT, MA 02149 Date(s) debt was incurred _____ Last 4 digits of account number <u>AMERGAS</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$28.16 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods sold</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.2	Nonpriority creditor's name and mailing address ATLANTIC COFFEE 267 LIBBEY PARKWAY WEYMOUTH, MA 02189 Date(s) debt was incurred _____ Last 4 digits of account number <u>ATLANTIC</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$108.75 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Services rendered</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.3	Nonpriority creditor's name and mailing address Aurentz, Vincent 1105 Pinehurst Dr Chapel Hill, NC 27517 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$283,038.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>EPIRUS Biopharmaceuticals, Inc. Severance Plan</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.4	Nonpriority creditor's name and mailing address BAR & KARRER Brandschenkestrasse 90 8002 Z rich SWITZERLAND Date(s) debt was incurred _____ Last 4 digits of account number <u>BARKARRE</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$10,289.25 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Services rendered</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.5	Nonpriority creditor's name and mailing address BENEFIT STRATEGIES PO BOX 1660 MANCHESTER, NH 03105-1660 Date(s) debt was incurred _____ Last 4 digits of account number <u>BENSTRAT</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Employee Benefit Plan administrator fees</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.6	Nonpriority creditor's name and mailing address BIOAGILYTX LABS 2300 ENGLERT DRIVE DURHAM, NC 27713 Date(s) debt was incurred _____ Last 4 digits of account number <u>BIOAGILY</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$36,401.55 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Services rendered</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.7	Nonpriority creditor's name and mailing address Biologics Development Services, LLC c/o Susan Lundy 5670 West Cypress Street Suite D Tampa, FL 33607 Date(s) debt was incurred _____ Last 4 digits of account number <u>BDS</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$57,178.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Services rendered</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Debtor **Epirus Biopharmaceuticals, Inc.** Case number (if known) _____

Name _____

3.8 Nonpriority creditor's name and mailing address **As of the petition filing date, the claim is: Check all that apply.** **\$88.74**
Biotech Services International Ltd
Biotech House, Central Park
Western Avenue, Bridgend Industrial Estate
Bridgend, CF31 3RT
UNITED KINGDOM
Date(s) debt was incurred _____
Last 4 digits of account number **BIOTEC**
☐ Contingent
☐ Unliquidated
☐ Disputed
Basis for the claim: **Services rendered**
Is the claim subject to offset? ☒ No ☐ Yes

3.9 Nonpriority creditor's name and mailing address **As of the petition filing date, the claim is: Check all that apply.** **\$32,147.50**
BTIG, LLC
600 Montgomery St - 6th FL
San Francisco, CA 94111
Date(s) debt was incurred _____
Last 4 digits of account number **BTIG**
☐ Contingent
☐ Unliquidated
☐ Disputed
Basis for the claim: **At-the-Market Sales Agreement dated February 29, 2016**
Is the claim subject to offset? ☒ No ☐ Yes

3.10 Nonpriority creditor's name and mailing address **As of the petition filing date, the claim is: Check all that apply.** **Unknown**
BTIG, LLC
825 Third Avenue
6th Floor
Attention: Chief Operating Officer
New York, NY 10022
Date(s) debt was incurred _____
Last 4 digits of account number _____
☐ Contingent
☐ Unliquidated
☐ Disputed
Basis for the claim: **At-the-Market Sales Agreement dated February 29, 2016**
Is the claim subject to offset? ☒ No ☐ Yes

3.11 Nonpriority creditor's name and mailing address **As of the petition filing date, the claim is: Check all that apply.** **\$0.00**
BTIG, LLC
600 Montgomery St - 6th FL
Attention: General Counsel and Chief Com
San Francisco, CA 94111
Date(s) debt was incurred _____
Last 4 digits of account number _____
☐ Contingent
☐ Unliquidated
☐ Disputed
Basis for the claim: **Additional Notice Party re At-the-Market Sales Agreement dated February 29, 2016**
Is the claim subject to offset? ☒ No ☐ Yes

3.12 Nonpriority creditor's name and mailing address **As of the petition filing date, the claim is: Check all that apply.** **\$104.92**
CAMBRIDGE PRINTING CO, INC
47 7TH ST.
CAMBRIDGE, MA 02141
Date(s) debt was incurred _____
Last 4 digits of account number **CAMBPRINT**
☐ Contingent
☐ Unliquidated
☐ Disputed
Basis for the claim: **Services rendered**
Is the claim subject to offset? ☒ No ☐ Yes

3.13 Nonpriority creditor's name and mailing address **As of the petition filing date, the claim is: Check all that apply.** **\$0.00**
Catalent Pharma Solutions, LLC
8137 Forsythia Street
Attention: Vice President/General Manage
Middleton, WI 53562
Date(s) debt was incurred _____
Last 4 digits of account number _____
☐ Contingent
☐ Unliquidated
☐ Disputed
Basis for the claim: **Moksha8 Pharmaceuticals, Inc. GPEx Cell Line Sales Agreement dated January 1, 2009**
Is the claim subject to offset? ☒ No ☐ Yes

3.14 Nonpriority creditor's name and mailing address **As of the petition filing date, the claim is: Check all that apply.** **\$0.00**
CEEK Enterprises
98 Newport Street
Arlington, MA 02476
Date(s) debt was incurred _____
Last 4 digits of account number **CEEK**
☐ Contingent
☐ Unliquidated
☐ Disputed
Basis for the claim: **Services rendered**
Is the claim subject to offset? ☒ No ☐ Yes

Debtor	Epirus Biopharmaceuticals, Inc. <small>Name</small>	Case number (if known) _____
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3.15	Nonpriority creditor's name and mailing address CFGH Holdings, LLC PO Box 8000 BUFFALO, NY 14267 Date(s) debt was incurred _____ Last 4 digits of account number <u>CORPFING</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$54,739.35 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Services rendered</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.16	Nonpriority creditor's name and mailing address Charles River Biopharma GmbH Max-Planck-Str. 15A 40699 Erkrath GERMANY Date(s) debt was incurred _____ Last 4 digits of account number <u>CHARLES-GERMANY</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$90,544.04 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Services rendered</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.17	Nonpriority creditor's name and mailing address CIT 21146 Network Place Chicago, IL 60673-1211 Date(s) debt was incurred _____ Last 4 digits of account number <u>CIT</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$883.43 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Contract No. -7-000 re Sharp Copier s/n 55079687</u> <u>MX-3640N</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.18	Nonpriority creditor's name and mailing address CMC Biologics A/S Vantaarnsvej 83B DK-2860 Soeborg Copenhagen DENMARK Date(s) debt was incurred _____ Last 4 digits of account number <u>CMCBIOLO</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$2,009,238.91 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Development and Manufacturing Service Agreement dated April 24, 2014</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.19	Nonpriority creditor's name and mailing address Comcast PO BOX 1577 NEWARK, NJ 07101-1577 Date(s) debt was incurred _____ Last 4 digits of account number <u>COMCASTO</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$352.37 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Services rendered</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.20	Nonpriority creditor's name and mailing address COMCAST BUSINESS PO BOX 37601 PHILADELPHIA, PA 19101-0601 Date(s) debt was incurred _____ Last 4 digits of account number <u>COMBUS</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,526.51 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Services rendered</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.21	Nonpriority creditor's name and mailing address COMPUTERSHARE Shareholders Svcs DEPT CH 19228 PALATINE, IL 60055-9228 Date(s) debt was incurred _____ Last 4 digits of account number <u>COMPUTER</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$2,173.70 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Services rendered</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Debtor **Epirus Biopharmaceuticals, Inc.**
Name

Case number (if known)

3.22	<p>Nonpriority creditor's name and mailing address Concur Technologies, Inc. 62157 Collections Center Drive Chicago, IL 60693</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number CONCUR</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Services rendered</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$2,785.64
3.23	<p>Nonpriority creditor's name and mailing address CRYOPORT PO BOX 205955 DALLAS, TX 75320-5955</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number CRYOPORT</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Services rendered</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$1,716.24
3.24	<p>Nonpriority creditor's name and mailing address DELOITTE TAX LLP PO BOX 844736 DALLAS, TX 75284-4736</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number DELOITTE</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Services rendered</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$333,513.00
3.25	<p>Nonpriority creditor's name and mailing address DiBiase, Mary 28 Boulder Brook Road Wellesley Hills, MA 02481</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: EPIRUS Biopharmaceuticals, Inc. Severance Plan</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$131,692.00
3.26	<p>Nonpriority creditor's name and mailing address Ernst & Young LLP Pittsbgb Ntnl Bnk - Pitt 640382 Pittsburgh, PA 15264-0382</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number ERNSTUS</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Services rendered</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$33,333.33
3.27	<p>Nonpriority creditor's name and mailing address Evaluate Ltd. 11-29 Fashion Street London E1 6PX UNITED KINGDOM</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number EVALUATE</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Services rendered</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$31,350.00
3.28	<p>Nonpriority creditor's name and mailing address EVERSOURCE PO BOX 660369 DALLAS, TX 75266-0369</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number EVERSOURCE</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Utilities</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$400.27

Debtor Epirus Biopharmaceuticals, Inc.		Case number (if known) _____	
Name _____			

3.29	Nonpriority creditor's name and mailing address Evicom Limited The Old Sail Loft Eel Pie Island, Twickenham Middlesex TW1 3DY UNITED KINGDOM Date(s) debt was incurred _____ Last 4 digits of account number <u>EVICOM</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Services rendered</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$17,288.51</u>
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3.30	Nonpriority creditor's name and mailing address FEDEX PO BOX 371461 PITTSBURGH, PA 15250-7461 Date(s) debt was incurred _____ Last 4 digits of account number <u>FEDEX</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Services rendered</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$754.06</u>
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3.31	Nonpriority creditor's name and mailing address FLEISHMANHILLARD INC PO BOX 771733 ST LOUIS, MO 63177 Date(s) debt was incurred _____ Last 4 digits of account number <u>FLEISHMAN</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Services rendered</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$39,318.18</u>
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3.32	Nonpriority creditor's name and mailing address Fujifilm Diosynth Biotechnologies Inc. Dept CH 16878 Palatine, IL 60055-6878 Date(s) debt was incurred _____ Last 4 digits of account number <u>FUJIFILM</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Bioprocessing Service Agreement dated April 17, 2013</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$1,736,200.00</u>
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3.33	Nonpriority creditor's name and mailing address Genefar B.V. The Management Board Ondernemingsweg 200 1422 DZ Uithoorn THE NETHERLANDS Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Stock Purchase Agreement dated June 30, 2016</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$0.00</u>
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3.34	Nonpriority creditor's name and mailing address Global Conferencing Solutions LLC P.O. Box 712524 Salt Lake City, UT 84171-2524 Date(s) debt was incurred _____ Last 4 digits of account number <u>GLOBALCO</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Services rendered</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$788.72</u>
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3.35	Nonpriority creditor's name and mailing address Greenberg Traurig, LLC The MetLife Building 200 Park Avenue Attention: Anthony J. Marsico, Esq. New York, NY 10166 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Additional Notice Party re At-the-Market Sales Agreement dated February 29, 2016</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$0.00</u>
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Debtor	Epirus Biopharmaceuticals, Inc. <small>Name</small>	Case number (if known) _____
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3.36	Nonpriority creditor's name and mailing address GROUP DYNAMIC INC 411 US ROUTE ONE FALMOUTH, ME 04105 Date(s) debt was incurred _____ Last 4 digits of account number GROUPDYN	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Employee Benefit Plan administrator fees</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.37	Nonpriority creditor's name and mailing address Iron Mountain PO Box 27128 New York, NY 10087-7128 Date(s) debt was incurred _____ Last 4 digits of account number IMOUNTAI	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,524.91 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Services rendered per Customer Agreement dated June 24, 2015</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.38	Nonpriority creditor's name and mailing address Kagy, Jeffrey 76 Millbrook Ave Walpole, MA 02081 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$127,192.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>EPIRUS Biopharmaceuticals, Inc. Severance Plan</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.39	Nonpriority creditor's name and mailing address KBI Biopharma, Inc. P.O. Box 15579 Durham, NC 27704 Date(s) debt was incurred _____ Last 4 digits of account number KBIBIOPH	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$145,313.65 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Services rendered</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.40	Nonpriority creditor's name and mailing address Laranjeira, Charles 30 Claremont Park Boston, MA 02118 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$144,192.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>EPIRUS Biopharmaceuticals, Inc. Severance Plan</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.41	Nonpriority creditor's name and mailing address MacDougall Biomedical Communications, In 888 Worcester St Wellesley, MA 02116 Date(s) debt was incurred _____ Last 4 digits of account number MACDOUGAL	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$198.75 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Services rendered</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.42	Nonpriority creditor's name and mailing address MARSHALL GERSTEIN & BORUN LLP 6300 WILLIS TOWER CHICAGO, IL 60606-6402 Date(s) debt was incurred _____ Last 4 digits of account number MARSHALL	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$3,233.87 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Services rendered</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Debtor	Epirus Biopharmaceuticals, Inc. <small>Name</small>	Case number (if known) _____
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3.43	Nonpriority creditor's name and mailing address Masy BioServices P.O. Box 485 Pepperell, MA 01463 Date(s) debt was incurred _____ Last 4 digits of account number <u>MASYSYST</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$8,645.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Services rendered</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.44	Nonpriority creditor's name and mailing address Mattos Filho Joaquim Eugenio de Lima 447 - S o Paulo SP 01403-001 BRAZIL Date(s) debt was incurred _____ Last 4 digits of account number <u>MATTOSFI</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$6,877.63 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Services rendered</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.45	Nonpriority creditor's name and mailing address McNiff, Kyle 61 West St Westford, MA 01886 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Clinical Consulting agreement effective July 1, 2016 for an initial term expiring January 1, 2017.</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.46	Nonpriority creditor's name and mailing address Mintz,Levin,Cohn,Ferris, Glovsky and Popeo, P.C One Financial Center Boston, MA 02111 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$49,093.58 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Services rendered</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.47	Nonpriority creditor's name and mailing address MORRIS NICHOLS ARSHT & TUNNELL 1201 North Market Street WILMINGTON, DE 19899-1347 Date(s) debt was incurred _____ Last 4 digits of account number <u>MORRISNICH</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$3,877.50 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Services rendered</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.48	Nonpriority creditor's name and mailing address Myoderm 330 DeKalb Street Norristown, PA 19401 Date(s) debt was incurred _____ Last 4 digits of account number <u>MYODERM</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$13,276.77 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Services rendered</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.49	Nonpriority creditor's name and mailing address Nasdaq Stock Market LBX #20200 Philadelphia,, PA 19178-0200 Date(s) debt was incurred _____ Last 4 digits of account number <u>NASDAQSTOCK</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$18,067.76 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Services rendered</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Debtor	Epirus Biopharmaceuticals, Inc. <small>Name</small>	Case number (if known) _____
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3.50	Nonpriority creditor's name and mailing address National Premier Partners, Inc. 44 Mechanic Street Newton, MA 02464 Date(s) debt was incurred _____ Last 4 digits of account number <u>NATPREM</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,776.57 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Services rendered</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.51	Nonpriority creditor's name and mailing address Northern Business Machines 24 Terry Avenue Burlington, MA 01803 Date(s) debt was incurred _____ Last 4 digits of account number <u>NBMACHIN</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$894.38 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Equipment Maintenance Agreement dated September 15, 2015</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.52	Nonpriority creditor's name and mailing address Patel, Suman 177 Rosemont Drive North Andover, MA 01845 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$131,692.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>EPIRUS Biopharmaceuticals, Inc. Severance Plan</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.53	Nonpriority creditor's name and mailing address PITNEY BOWES PO BOX 371874 PITTSBURGH, PA 15250-7874 Date(s) debt was incurred _____ Last 4 digits of account number <u>PITNEYBW</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$227.18 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Purchase Power Equipment, Services and Software Meter Rental agreement</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.54	Nonpriority creditor's name and mailing address QUENCH USA INC PO BOX 8500 PHILADELPHIA, PA 19178-3203 Date(s) debt was incurred _____ Last 4 digits of account number <u>QUENCH</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$414.38 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Services rendered</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.55	Nonpriority creditor's name and mailing address Reliance Life Sciences Pvt. Ltd. Dhirubhai Ambani Life Sciences Centre Thane-Belapur Road, Rabale Navi Mumbai-400 701 Attention: K.V. Subr INDIA Date(s) debt was incurred _____ Last 4 digits of account number <u>RELIANCE</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$6,750.16 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Services rendered</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.56	Nonpriority creditor's name and mailing address RSM US LLP 5155 Paysphere Circle Chicago, IL 60674 Date(s) debt was incurred _____ Last 4 digits of account number <u>RSM</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$35,754.60 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Services rendered</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Debtor	Epirus Biopharmaceuticals, Inc. <small>Name</small>	Case number (if known) _____
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3.57	Nonpriority creditor's name and mailing address Scribner, Susan 319 Park Street North Reading, MA 01864 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Consulting Agreement effective May 23, 2016 for an initial term expiring on July 31, 2016</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.58	Nonpriority creditor's name and mailing address Shea, Thomas 8 Villa Drive Medway, MA 02053 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$238,788.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>EPIRUS Biopharmaceuticals, Inc. Severance Plan</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.59	Nonpriority creditor's name and mailing address Staples Advantage Dept BOS Boston, MA 02241-5256 Date(s) debt was incurred _____ Last 4 digits of account number <u>STAPLES</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$123.89 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods sold</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.60	Nonpriority creditor's name and mailing address Taro Pharmaceuticals USA Inc. 3 Skyline Drive Attention: General Counsel Hawthorne, NY 10532 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Share Purchase Agreement dated October 1, 2015</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.61	Nonpriority creditor's name and mailing address THRIVE NETWORKS INC. 495 BUSINESS CENTER, BLDG 300 TEWKSBURY, MA 01876 Date(s) debt was incurred _____ Last 4 digits of account number <u>THRIVE</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$12,391.62 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Services rendered</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.62	Nonpriority creditor's name and mailing address Ticktin, Robert 37 Marshall Rd Wellesley, MA 02482 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$231,288.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>EPIRUS Biopharmaceuticals, Inc. Severance Plan</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.63	Nonpriority creditor's name and mailing address VANGUARD C/O ASCENSUS NEW YORK, NY 10087 Date(s) debt was incurred _____ Last 4 digits of account number <u>VANGUARD</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,167.50 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Services rendered</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Debtor **Epirus Biopharmaceuticals, Inc.** Case number (if known) _____
Name

3.64 Nonpriority creditor's name and mailing address **Wahlberg, Laura**
307 Farm St
Bellingham, MA 02019
Date(s) debt was incurred _____
Last 4 digits of account number _____
As of the petition filing date, the claim is: Check all that apply. **Unknown**
☐ Contingent
☐ Unliquidated
☐ Disputed
Basis for the claim: **Consulting Agreement effective May 16, 2016 for an initial term expiring July 29, 2016**
Is the claim subject to offset? ☒ No ☐ Yes

3.65 Nonpriority creditor's name and mailing address **Waldron, Alex**
104 Lagrane St
Chestnut Hill, MA 02467
Date(s) debt was incurred _____
Last 4 digits of account number _____
As of the petition filing date, the claim is: Check all that apply. **\$129,192.00**
☐ Contingent
☐ Unliquidated
☐ Disputed
Basis for the claim: **EPIRUS Biopharmaceuticals, Inc. Severance Plan**
Is the claim subject to offset? ☒ No ☐ Yes

3.66 Nonpriority creditor's name and mailing address **WRAYS PTY LTD**
PO BOX Z5466
PERTH, WA 06831
Date(s) debt was incurred _____
Last 4 digits of account number **WRAYS**
As of the petition filing date, the claim is: Check all that apply. **\$11,809.74**
☐ Contingent
☐ Unliquidated
☐ Disputed
Basis for the claim: **Services rendered**
Is the claim subject to offset? ☒ No ☐ Yes

3.67 Nonpriority creditor's name and mailing address **WuXi AppTec**
24681 Network Place
Chicago, IL 60673-1681
Date(s) debt was incurred _____
Last 4 digits of account number **WUXI**
As of the petition filing date, the claim is: Check all that apply. **\$192,853.70**
☐ Contingent
☐ Unliquidated
☐ Disputed
Basis for the claim: **Services rendered**
Is the claim subject to offset? ☒ No ☐ Yes

3.68 Nonpriority creditor's name and mailing address **Wyand, DVM, Ph.D., Michael**
113 Maple St
Stow, MA 01775
Date(s) debt was incurred _____
Last 4 digits of account number _____
As of the petition filing date, the claim is: Check all that apply. **\$238,788.00**
☐ Contingent
☐ Unliquidated
☐ Disputed
Basis for the claim: **EPIRUS Biopharmaceuticals, Inc. Severance Plan**
Is the claim subject to offset? ☒ No ☐ Yes

Part 3: List Others to Be Notified About Unsecured Claims

4. List in alphabetical order any others who must be notified for claims listed in Parts 1 and 2. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for unsecured creditors.

If no others need to be notified for the debts listed in Parts 1 and 2, do not fill out or submit this page. If additional pages are needed, copy the next page.

	Name and mailing address	On which line in Part1 or Part 2 is the related creditor (if any) listed?	Last 4 digits of account number, if any
4.1	Blake, Cassels & Graydon LLP 595 Burrard Street, P.O. Box 49314 Suite 2600, Three Bentall Centre Vancouver, British Columbia V7X 1L3 Atte CANADA	Line 3.60 <input type="checkbox"/> Not listed. Explain _____	—

Debtor **Epirus Biopharmaceuticals, Inc.**

Case number (if known)

Name

Name and mailing address

On which line in Part 1 or Part 2 is the related creditor (if any) listed?

Last 4 digits of account number, if any

4.2 **Borden Ladner Gervais LLP**
40 King Street West
Attention: Adrian Liu
Toronto, Ontario M5H 3Y4
CANADA

Line **3.60**

—

☐ Not listed. Explain _____

4.3 **Catalent Pharma Solutions, LLC**
14 Schoolhouse Road
Attention: General Counsel (Legal Depart
Somerset, NJ 08873

Line **3.13**

—

☐ Not listed. Explain _____

4.4 **Fujifilm Diosynth Biotechnologies**
Belasis Avenue
Billingham, TZ23 1LH
General Counsel
UNITED KINGDOM

Line **3.32**

—

☐ Not listed. Explain _____

4.5 **Fujifilm Holdings America Corporation**
200 Summit Lake Drive
Assistant General Counsel
Valhalla, NY 10595-1356

Line **3.32**

—

☐ Not listed. Explain _____

4.6 **Van Benthem & Keulen NV**
Archimedeslaan 61
3584 BA Utrecht
Attention: Mr. S.E. Storm, attorney
THE NETHERLANDS

Line **3.33**

—

☐ Not listed. Explain _____

Part 4: Total Amounts of the Priority and Nonpriority Unsecured Claims

5. Add the amounts of priority and nonpriority unsecured claims.

5a. Total claims from Part 1

5b. Total claims from Part 2

5c. Total of Parts 1 and 2

Lines 5a + 5b = 5c.

Total of claim amounts

5a. \$ **0.00**

5b. + \$ **6,663,388.27**

5c. \$ **6,663,388.27**

Fill in this information to identify the case:

Debtor name **Epirus Biopharmaceuticals, Inc.**

United States Bankruptcy Court for the: **DISTRICT OF MASSACHUSETTS**

Case number (if known) _____

☐ Check if this is an amended filing

Official Form 206G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If more space is needed, copy and attach the additional page, number the entries consecutively.

1. Does the debtor have any executory contracts or unexpired leases?

☐ No. Check this box and file this form with the debtor's other schedules. There is nothing else to report on this form.

☒ Yes. Fill in all of the information below even if the contacts of leases are listed on *Schedule A/B: Assets - Real and Personal* (Official Form 206A/B).

Property

2. List all contracts and unexpired leases

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2.1. State what the contract or lease is for and the nature of the debtor's interest

Second Definitive License Agreement dated October 1, 2013

State the term remaining

List the contract number of any government contract _____

**Bioceros Holding B.V.
Yalelaan 46
3584 CM Utrecht
Attention: Remco M. Brandt
THE NETHERLANDS**

2.2. State what the contract or lease is for and the nature of the debtor's interest

Additional Notice Party re Share Purchase Agreement dated October 1, 2015

State the term remaining

List the contract number of any government contract _____

**Blake, Cassels & Graydon LLP
595 Burrard Street, P.O. Box 49314
Suite 2600, Three Bentall Centre
Vancouver, British Columbia V7X 1L3 Atte
CANADA**

2.3. State what the contract or lease is for and the nature of the debtor's interest

Additional Notice Party re Share Purchase Agreement dated October 1, 2015

State the term remaining

List the contract number of any government contract _____

**Borden Ladner Gervais LLP
40 King Street West
Attention: Adrian Liu
Toronto, Ontario M5H 3Y4
CANADA**

2.4. State what the contract or lease is for and the nature of the debtor's interest

Contract No. -7-000 re Sharp Copier s/n 55079687 MX-3640N

State the term remaining

List the contract number of any government contract _____

**CIT
1021 Centurion Pkwy N
Suite 100
Attn: Bankruptcy Management
Jacksonville, FL 32256**

Debtor 1 **Epirus Biopharmaceuticals, Inc.**

Case number (if known)

First Name

Middle Name

Last Name

Additional Page if You Have More Contracts or Leases

2. List all contracts and unexpired leases

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2.5.	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>Development and Manufacturing Service Agreement dated April 24, 2014</p>	<p>CMC Biologics A/S Vantaarnsvej 83B DK-2860 Soeborg Copenhagen DENMARK</p>
2.6.	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>Lease dated March, 2013, as Amended</p>	<p>CPT ONE EXETER PLAZA, LLC c/o AEW Capital Management, L.P. Two Seaport Lane, World Trade Center Eas Attention: Asset Manager for CPT One Exe Boston, MA 02210</p>
2.7.	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>Exclusive License Agreement dated June 30, 2016</p>	<p>Epirus Pharmaceuticals (Netherlands) B.V Yalelaan 46 3584 CM Utrecht THE NETHERLANDS</p>
2.8.	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>Bioprocessing Service Agreement dated April 17, 2013</p>	<p>Fujifilm Diosynth Biotechnologies 101 J. Morris Commons Lane President Morrisville, NC 27560</p>
2.9.	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>Stock Purchase Agreement dated June 30, 2016</p>	<p>Genefar B.V. The Management Board Ondernemingsweg 200 1422 DZ Uithoorn THE NETHERLANDS</p>
2.10.	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>State the term remaining</p>	<p>Warrant Agreement re purchase 64,194 shares of Public Epirus Common Stock at \$7.01 per share</p>	<p>Hercules Technology Growth Capital, Inc. Legal Department Attn: Chief Legal Offic and Mr. Bryan Jadot 400 Hamilton Avenue, Suite 310 Palo Alto, CA 94301</p>

Debtor 1 **Epirus Biopharmaceuticals, Inc.**

First Name

Middle Name

Last Name

Case number (if known)

Additional Page if You Have More Contracts or Leases

2. List all contracts and unexpired leases

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

List the contract number of any government contract

- 2.11. State what the contract or lease is for and the nature of the debtor's interest

Customer Agreement dated June 24, 2015

State the term remaining

List the contract number of any government contract

**Iron Mountain
PO Box 27128
New York, NY 10087-7128**

- 2.12. State what the contract or lease is for and the nature of the debtor's interest

Equipment Maintenance Agreement dated September 15, 2015

State the term remaining

List the contract number of any government contract

**Nothorn Business Machines
24 Terry Avenue
Burlington, MA 01803**

- 2.13. State what the contract or lease is for and the nature of the debtor's interest

Lease Agreement re equipment description MX-3640

State the term remaining

List the contract number of any government contract

**Nothorn Business Machines
24 Terry Avenue
Burlington, MA 01803**

- 2.14. State what the contract or lease is for and the nature of the debtor's interest

Sales Agreement (Lease) re equipment description Sharp MX-3640N, Sharp MX-DE14, and Sharp MX-TU12

State the term remaining

List the contract number of any government contract

**Nothorn Business Machines
24 Terry Avenue
Burlington, MA 01803**

- 2.15. State what the contract or lease is for and the nature of the debtor's interest

Purchase Power Equipment, Services and Software Meter Rental agreement

State the term remaining

List the contract number of any government contract

**Pitney Bowes
225 American Drive
Neenah, WI 54956-1005**

Debtor 1 **Epirus Biopharmaceuticals, Inc.**

First Name

Middle Name

Last Name

Case number (if known)

Additional Page if You Have More Contracts or Leases

2. List all contracts and unexpired leases

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

- 2.16. State what the contract or lease is for and the nature of the debtor's interest
- Collaboration Agreement dated July 13, 2015**

State the term remaining

List the contract number of any government contract

**Swiss Pharma International AG
Waldmannstrasse 8
8001 Zurich
Attention: General Counsel
SWITZERLAND**

- 2.17. State what the contract or lease is for and the nature of the debtor's interest
- Share Purchase Agreement dated October 1, 2015**

State the term remaining

List the contract number of any government contract

**Taro Pharmaceuticals USA Inc.
3 Skyline Drive
Attention: General Counsel
Hawthorne, NY 10532**

Fill in this information to identify the case:

Debtor name Epirus Biopharmaceuticals, Inc.

United States Bankruptcy Court for the: DISTRICT OF MASSACHUSETTS

Case number (if known) _____

☐ Check if this is an amended filing

Official Form 206H
Schedule H: Your Codebtors

12/15

Be as complete and accurate as possible. If more space is needed, copy the Additional Page, numbering the entries consecutively. Attach the Additional Page to this page.

1. Do you have any codebtors?

- ☒ No. Check this box and submit this form to the court with the debtor's other schedules. Nothing else needs to be reported on this form.
☐ Yes

2. In Column 1, list as codebtors all of the people or entities who are also liable for any debts listed by the debtor in the schedules of creditors, Schedules D-G. Include all guarantors and co-obligors. In Column 2, identify the creditor to whom the debt is owed and each schedule on which the creditor is listed. If the codebtor is liable on a debt to more than one creditor, list each creditor separately in Column 2.

Column 1: Codebtor

Column 2: Creditor

Name

Mailing Address

Name

Check all schedules that apply:

2.1

Street

☐ D
☐ E/F
☐ G

City State Zip Code

2.2

Street

☐ D
☐ E/F
☐ G

City State Zip Code

2.3

Street

☐ D
☐ E/F
☐ G

City State Zip Code

2.4

Street

☐ D
☐ E/F
☐ G

City State Zip Code

Fill in this information to identify the case:

Debtor name Epirus Biopharmaceuticals, Inc.

United States Bankruptcy Court for the: DISTRICT OF MASSACHUSETTS

Case number (if known) _____

☐ Check if this is an amended filing

Official Form 207

Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy

04/16

The debtor must answer every question. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and case number (if known).

Part 1: Income

1. Gross revenue from business

☐ None.

Identify the beginning and ending dates of the debtor's fiscal year, which may be a calendar year

From the beginning of the fiscal year to filing date:
From 1/01/2016 to **Filing Date**

Sources of revenue
Check all that apply

☒ Operating a business
☐ Other _____

Gross revenue
(before deductions and exclusions)

\$660,085.00

For prior year:
From 1/01/2015 to 12/31/2015

☒ Operating a business
☐ Other _____

\$701,000.00

For year before that:
From 1/01/2014 to 12/31/2014

☒ Operating a business
☐ Other _____

\$4,000.00

2. Non-business revenue

Include revenue regardless of whether that revenue is taxable. *Non-business income* may include interest, dividends, money collected from lawsuits, and royalties. List each source and the gross revenue for each separately. Do not include revenue listed in line 1.

☒ None.

Description of sources of revenue

Gross revenue from each source
(before deductions and exclusions)

Part 2: List Certain Transfers Made Before Filing for Bankruptcy

3. Certain payments or transfers to creditors within 90 days before filing this case

List payments or transfers--including expense reimbursements--to any creditor, other than regular employee compensation, within 90 days before filing this case unless the aggregate value of all property transferred to that creditor is less than \$6,425. (This amount may be adjusted on 4/01/19 and every 3 years after that with respect to cases filed on or after the date of adjustment.)

☐ None.

Creditor's Name and Address

Dates

Total amount of value

Reasons for payment or transfer
Check all that apply

Debtor **Epirus Biopharmaceuticals, Inc.**

Case number (if known)

Creditor's Name and Address	Dates	Total amount of value	Reasons for payment or transfer <i>Check all that apply</i>
3.1. See list attached		\$4,658,371.96	<input checked="" type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input checked="" type="checkbox"/> Suppliers or vendors <input checked="" type="checkbox"/> Services <input type="checkbox"/> Other__

4. Payments or other transfers of property made within 1 year before filing this case that benefited any insider

List payments or transfers, including expense reimbursements, made within 1 year before filing this case on debts owed to an insider or guaranteed or cosigned by an insider unless the aggregate value of all property transferred to or for the benefit of the insider is less than \$6,425. (This amount may be adjusted on 4/01/19 and every 3 years after that with respect to cases filed on or after the date of adjustment.) Do not include any payments listed in line 3. *Insiders* include officers, directors, and anyone in control of a corporate debtor and their relatives; general partners of a partnership debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(31).

☐ None.

Insider's name and address Relationship to debtor	Dates	Total amount of value	Reasons for payment or transfer
4.1. See list attached		\$475,582.94	

5. Repossessions, foreclosures, and returns

List all property of the debtor that was obtained by a creditor within 1 year before filing this case, including property repossessed by a creditor, sold at a foreclosure sale, transferred by a deed in lieu of foreclosure, or returned to the seller. Do not include property listed in line 6.

☒ None

Creditor's name and address	Describe of the Property	Date	Value of property
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6. Setoffs

List any creditor, including a bank or financial institution, that within 90 days before filing this case set off or otherwise took anything from an account of the debtor without permission or refused to make a payment at the debtor's direction from an account of the debtor because the debtor owed a debt.

☐ None

Creditor's name and address	Description of the action creditor took	Date action was taken	Amount
CPT ONE EXETER PLAZA, LLC c/o AEW Capital Management, L.P. Two Seaport Lane, World Trade Center Eas Attention: Asset Manager for CPT One Exe Boston, MA 02210	Outstanding rent through June 2016 taken from security deposit funds. Last 4 digits of account number: <u>-002</u>	7/6/2016	\$213,025.08

Part 3: Legal Actions or Assignments

7. Legal actions, administrative proceedings, court actions, executions, attachments, or governmental audits

List the legal actions, proceedings, investigations, arbitrations, mediations, and audits by federal or state agencies in which the debtor was involved in any capacity—within 1 year before filing this case.

☐ None.

Case title Case number	Nature of case	Court or agency's name and address	Status of case
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Debtor **Epirus Biopharmaceuticals, Inc.**

Case number (if known)

	Case title Case number	Nature of case	Court or agency's name and address	Status of case
7.1.	THE BIO-PHARMA CONSULTANCY LIMITED v. EPIRUS BIOPHARMACEUTICALS, INC., Case No. 1:15-CV-12898-MLW	Lawsuit for ~£290k for unpaid past consulting services	United States District Court For the District of Massachusetts 1 Courthouse Way Boston, MA 02210	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input checked="" type="checkbox"/> Concluded
7.2.	Reliance Life Sciences Pvt. Ltd. vs Epirus Pharmaceuticals (Switzerland) GmbH 20894/RD	Arbitration proceeding under the Manufacturing and Supply Agreement dated May 14, 2014	ICC International Court of Arbitration 33-43 avenue du President Wilson 75116 Paris FRANCE	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input checked="" type="checkbox"/> Concluded

8. Assignments and receivership

List any property in the hands of an assignee for the benefit of creditors during the 120 days before filing this case and any property in the hands of a receiver, custodian, or other court-appointed officer within 1 year before filing this case.

☒ None

Part 4: Certain Gifts and Charitable Contributions

9. List all gifts or charitable contributions the debtor gave to a recipient within 2 years before filing this case unless the aggregate value of the gifts to that recipient is less than \$1,000

☒ None

Recipient's name and address	Description of the gifts or contributions	Dates given	Value
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Part 5: Certain Losses

10. All losses from fire, theft, or other casualty within 1 year before filing this case.

☒ None

Description of the property lost and how the loss occurred	Amount of payments received for the loss	Dates of loss	Value of property lost
	<p>If you have received payments to cover the loss, for example, from insurance, government compensation, or tort liability, list the total received.</p> <p>List unpaid claims on Official Form 106A/B (Schedule A/B: Assets – Real and Personal Property).</p>		

Part 6: Certain Payments or Transfers

11. Payments related to bankruptcy

List any payments of money or other transfers of property made by the debtor or person acting on behalf of the debtor within 1 year before the filing of this case to another person or entity, including attorneys, that the debtor consulted about debt consolidation or restructuring, seeking bankruptcy relief, or filing a bankruptcy case.

☐ None.

Debtor **Epirus Biopharmaceuticals, Inc.**

Case number (if known)

	Who was paid or who received the transfer? Address	If not money, describe any property transferred	Dates	Total amount or value
11.1.	Mintz Levin Cohn Ferris Glovesky and Popeo PC One Financial Center Boston, MA 02111		July 7, 2016	\$60,000.00

Email or website address
chorian@mintz.com

Who made the payment, if not debtor?

11.2.	Verdolino & Lowey PC Pine Brook Office Park 124 Washington St. Foxboro, MA 02035		July 7, 2016	\$45,000.00
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Email or website address
mmartin@vllpc.com

Who made the payment, if not debtor?

12. Self-settled trusts of which the debtor is a beneficiary

List any payments or transfers of property made by the debtor or a person acting on behalf of the debtor within 10 years before the filing of this case to a self-settled trust or similar device.

Do not include transfers already listed on this statement.

☒ None.

Name of trust or device	Describe any property transferred	Dates transfers were made	Total amount or value
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13. Transfers not already listed on this statement

List any transfers of money or other property by sale, trade, or any other means made by the debtor or a person acting on behalf of the debtor within 2 years before the filing of this case to another person, other than property transferred in the ordinary course of business or financial affairs. Include both outright transfers and transfers made as security. Do not include gifts or transfers previously listed on this statement.

☐ None.

	Who received transfer? Address	Description of property transferred or payments received or debts paid in exchange	Date transfer was made	Total amount or value
13.1	Moksha8 Pharmaceuticals, Inc. 1550 Liberty Ridge Drive Suite 300 Wayne, PA 19087	Termination of the company's revenue sharing payment obligations with respect to products that are biosimilars to infliximab, in exchange for payments of \$1,400,000	Sept 2014 & Oct 2014	\$1,400,000.00

Relationship to debtor
Affiliated through common ownership

Debtor **Epirus Biopharmaceuticals, Inc.**

Case number (if known) _____

	Who received transfer? Address	Description of property transferred or payments received or debts paid in exchange	Date transfer was made	Total amount or value
13.2	Epirus Pharmaceuticals (Switzerland) Gmb General Guisan- Strasse 6 6303 Zug SWITZERLAND	TRANSFER FUNDS TO SWISS	10/7/2014	\$1,000,000.00
	Relationship to debtor Subsidiary			
13.3	Epirus Pharmaceuticals (Switzerland) Gmb General Guisan- Strasse 6 6303 Zug SWITZERLAND	Reclass Investment	12/31/2014	\$12,000,000.00
	Relationship to debtor Subsidiary			
13.4	Reliance Life Sciences Pvt. Ltd. Dhirubhai Ambani Life Sciences Centre Thane-Belapur Road, Rabale Navi Mumbai-400 701 Attention: K.V. Subr INDIA	Reliance settlement agreement on BOW015 Manufacturing and Supply in April 2015 to resolve dispute on Reliance's exclusivity rights for BOW015 production.	4/1/2015	\$1,750,000.00
	Relationship to debtor			
13.5	Taro Pharmaceuticals USA Inc. 3 Skyline Drive Attention: General Counsel Hawthorne, NY 10532	All of the issued and outstanding shares of Zalicus Pharmaceuticals Ltd., re Share Purchase Agreement dated October 1, 2015	10/1/2015	\$10,000,000.00
	Relationship to debtor			
13.6	Epirus Pharmaceuticals (Switzerland) Gmb General Guisan- Strasse 6 6303 Zug SWITZERLAND	CAPITAL CONTRIBUTION US TO SW	11/30/2015	\$250,000.00
	Relationship to debtor Subsidiary			
13.7	Epirus Pharmaceuticals (Switzerland) Gmb General Guisan- Strasse 6 6303 Zug SWITZERLAND	EQ INVST FROM EP US	12/24/2015	\$15,000,000.00
	Relationship to debtor Subsidiary			

Debtor **Epirus Biopharmaceuticals, Inc.**

Case number (if known)

	Who received transfer? Address	Description of property transferred or payments received or debts paid in exchange	Date transfer was made	Total amount or value
13.8	Epirus Pharmaceuticals (Switzerland) Gmb General Guisan- Strasse 6 6303 Zug SWITZERLAND	EPIRUS US TRANSFER	3/31/2016	\$1,000,000.00
	Relationship to debtor Subsidiary			
13.9	Genefar B.V. Ondernemingsweg 200 1422 DZ Uithoorn NETHERLANDS	1,247,349 shares in the share capital of Epirus Pharmaceuticals (Netherlands) B.V., with a principal place of business at Yalelaan 46, 3584 CM Utrecht, The Netherlands, re Stock Purchase Agreement dated June 30, 2016 and Settlement Agreement effective June 30, 2016	6/30/2016	\$1,679,789.00
	Relationship to debtor			
13.10	Carine van den Brink Stichting Derdengelden Axon Advocaten Piet Heinkade 193 1019 HC Amsterdam THE NETHERLANDS	Paid to Carine van den Brink in her capacity of attorney of the Bioceros Sellers per Settlement Agreement dated June 30, 2016	6/30/2016	\$2,082,262.00
	Relationship to debtor			
13.11	Verdolino & Lowey PC Pine Brook Office Park 124 Washington St. Foxboro, MA 02035	Wind Down funds	7/7/2016	\$200,000.00
	Relationship to debtor			
13.12	Livzon Mabpharma, Inc. West Gate of Livzon Industrial Park No. 38 Chuangye North Road, Liangang Ind Hongqi Town, Jinwan Area, Zhuhai Guangdo CHINA	BOW070 Assigned Materials re Settlement Satisfaction Amendment to Livzon Agreements (Including BOW070 Supplement) dated July 15, 2016 including exclusive rights in respect of the BOW070 LExclusive License Agreement dated 30 June 2016 between Epirus and Bioceros Holding BV, all right title and interest in and to all BOW070 cell-line clones and development reports and related materials.	7/15/2016	Unknown
	Relationship to debtor			

Debtor **Epirus Biopharmaceuticals, Inc.**

Case number (if known)

Who received transfer? Address	Description of property transferred or payments received or debts paid in exchange	Date transfer was made	Total amount or value
13.1 3. Reliance Life Sciences Pvt. Ltd. Dhirubhai Ambani Life Sciences Centre Thane-Belapur Road, Rabale Navi Mumbai-400 701 Attention: K.V. Subr INDIA	BOW015 Agreements per Settlement Satisfaction Agreement dated July 18, 2016, including Sun Pharma BOW015 License Agreement, dated 3 January 2014 between Sun Pharma (as sucessor to Ranbaxy Laboratories) and Epirus, Catalent GPEX Cell Line Sales Agreement dated 1 January 2009 between Catalent Pharma Solutions, LLC and Epirus, Cell Bank Storgae Agreement daed 6 July 2009 between Catalent and Epirus, and PI clinical trial data outside India for BOW015 infliximab.	7/18/2016	Unknown
Relationship to debtor			

Part 7: Previous Locations

14. Previous addresses

List all previous addresses used by the debtor within 3 years before filing this case and the dates the addresses were used.

☐ Does not apply

Address	Dates of occupancy From-To
14.1. Fourteen22, Inc. 836 Alvarado Street San Francisco, CA 94114	From January 2011
14.2. Fourteen22, Inc. c/o Maples Corporate Services Limited PO Box 309, Ugland House Grand Cayman KY CAYMAN ISLANDS	From January 2011
14.3. Fourteen22, Inc. 800 Boylston Street Boston, MA 02116	From January 2011
14.4. Zalicus Pharmaceuticals Ltd. 301 – 2389 Health Sciences Mall Vancouver British Columbia V6T 1Z3 CANADA	From September 2010 to October 2015
14.5. Neuromed Pharmaceuticals Limited 301 – 2389 Health Sciences Mall Vancouver British Columbia V6T 1Z3 CANADA	From September 2010 to October 2015
14.6. Zalicus Pharmaceuticals Ltd. c/o Zalicus Inc. 245 First Street Third Floor Cambridge, MA 02142	From September 2010 to October 2015
14.7. Epirus Pharmaceuticals (Switzerland) Gmb General Guisan- Strasse 6 6303 Zug SWITZERLAND	From June 2013 to June 2016

Debtor **Epirus Biopharmaceuticals, Inc.**

Case number (if known)

	Address	Dates of occupancy From-To
14.8.	Epirus Biopharmaceuticals Ltd. 11 Old Jewry 7th Floor London EC2R 8DU UNITED KINGDOM	From January 2011
14.9.	Fourteen22 (UK) Limited 11 Old Jewry 7th Floor London EC2R 8DU UNITED KINGDOM	From January 2011
14.10	Epirus Brasil Tecnologia Ltda Avenida Bernardino de Campos 98 - 6º Andar Paraíso São Paulo 04004-0 BRAZIL	From October 2013
14.11	Epirus Biopharmaceuticals (Netherlands) Yalelaan 46 3584 CM Utrecht NETHERLANDS	From September 2015 to June 2016

Part 8: Health Care Bankruptcies

15. Health Care bankruptcies

Is the debtor primarily engaged in offering services and facilities for:

- diagnosing or treating injury, deformity, or disease, or
- providing any surgical, psychiatric, drug treatment, or obstetric care?

- ☒ No. Go to Part 9.
- ☐ Yes. Fill in the information below.

Facility name and address

Nature of the business operation, including type of services the debtor provides

If debtor provides meals and housing, number of patients in debtor's care

Part 9: Personally Identifiable Information

16. Does the debtor collect and retain personally identifiable information of customers?

- ☒ No.
- ☐ Yes. State the nature of the information collected and retained.

17. Within 6 years before filing this case, have any employees of the debtor been participants in any ERISA, 401(k), 403(b), or other pension or profit-sharing plan made available by the debtor as an employee benefit?

- ☐ No. Go to Part 10.
- ☒ Yes. Does the debtor serve as plan administrator?

☐ No Go to Part 10.

☒ Yes. Fill in below:

Name of plan

Epirus Biopharmaceuticals, Inc. 401 (k) Plan

Employer identification number of the plan

EIN: **27-4642150**

Has the plan been terminated?

☐ No

☒ Yes

☐ No Go to Part 10.

☒ Yes. Fill in below:

Name of plan

Epirus Biopharmaceuticals, Inc. 401 (k) Plan

Employer identification number of the plan

EIN: **04-3514457**

Debtor **Epirus Biopharmaceuticals, Inc.**

Case number (if known) _____

Has the plan been terminated?

☐ No☒ Yes☐ No Go to Part 10.☒ Yes. Fill in below:

Name of plan

Zalicus Inc. 401(k) Plan

Employer identification number of the plan

EIN: **04-3514457**

Has the plan been terminated?

☐ No☒ Yes**Part 10: Certain Financial Accounts, Safe Deposit Boxes, and Storage Units****18. Closed financial accounts**

Within 1 year before filing this case, were any financial accounts or instruments held in the debtor's name, or for the debtor's benefit, closed, sold, moved, or transferred?

Include checking, savings, money market, or other financial accounts; certificates of deposit; and shares in banks, credit unions, brokerage houses, cooperatives, associations, and other financial institutions.

☐ None

	Financial Institution name and Address	Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
18.1.	Silicon Valley Bank 3003 Tasman Dr. <input type="checkbox"/> Santa Clara, CA 95054	XXXX-0602	<input checked="" type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Money Market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other ___	6/29/2016	\$95,746.52
18.2.	Silicon Valley Bank 3003 Tasman Dr. <input type="checkbox"/> Santa Clara, CA 95054	XXXX-6657	<input checked="" type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Money Market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other ___	6/2/2016	\$25,000.89
18.3.	Silicon Valley Bank 3003 Tasman Dr. <input type="checkbox"/> Santa Clara, CA 95054	XXXX-5731	<input type="checkbox"/> Checking <input type="checkbox"/> Savings <input checked="" type="checkbox"/> Money Market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other ___	5/27/2016	\$25,000.89
18.4.	Citi Brazil Avenida Paulista, 1.111 São Paulo - SP 01311- 920 BRAZIL	XXXX-3029	<input checked="" type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Money Market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other ___	4/7/2016	\$230,000.00

19. Safe deposit boxes

List any safe deposit box or other depository for securities, cash, or other valuables the debtor now has or did have within 1 year before filing this case.

Debtor **Epirus Biopharmaceuticals, Inc.**

Case number (if known) _____

☒ None

Depository institution name and address	Names of anyone with access to it Address	Description of the contents	Do you still have it?
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20. Off-premises storage

List any property kept in storage units or warehouses within 1 year before filing this case. Do not include facilities that are in a part of a building in which the debtor does business.

☐ None

Facility name and address	Names of anyone with access to it	Description of the contents	Do you still have it?
Iron Mountain 175 Bearfoot Road Northborough, MA 01532	Kagy, Jeffrey 76 Millbrook Ave Walpole, MA 02081	Records relating to Zalicus	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes
	Daly, Sheila 218 Cedar St. Wellesley Hills, MA 02481		
	Cavanaugh, Taylor 1750 Commonwealth Ave. #3 Brighton, MA 02135		

Part 11: Property the Debtor Holds or Controls That the Debtor Does Not Own**21. Property held for another**

List any property that the debtor holds or controls that another entity owns. Include any property borrowed from, being stored for, or held in trust. Do not list leased or rented property.

☒ None**Part 12: Details About Environment Information**

For the purpose of Part 12, the following definitions apply:

Environmental law means any statute or governmental regulation that concerns pollution, contamination, or hazardous material, regardless of the medium affected (air, land, water, or any other medium).

Site means any location, facility, or property, including disposal sites, that the debtor now owns, operates, or utilizes or that the debtor formerly owned, operated, or utilized.

Hazardous material means anything that an environmental law defines as hazardous or toxic, or describes as a pollutant, contaminant, or a similarly harmful substance.

Report all notices, releases, and proceedings known, regardless of when they occurred.

22. Has the debtor been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.☒ No.☐ Yes. Provide details below.

Case title Case number	Court or agency name and address	Nature of the case	Status of case
---------------------------	----------------------------------	--------------------	----------------

23. Has any governmental unit otherwise notified the debtor that the debtor may be liable or potentially liable under or in violation of an environmental law?

Debtor **Epirus Biopharmaceuticals, Inc.**

Case number (if known) _____

- ☒ No.
☐ Yes. Provide details below.

Site name and address

Governmental unit name and address

Environmental law, if known

Date of notice

24. Has the debtor notified any governmental unit of any release of hazardous material?

- ☒ No.
☐ Yes. Provide details below.

Site name and address

Governmental unit name and address

Environmental law, if known

Date of notice

Part 13: Details About the Debtor's Business or Connections to Any Business

25. Other businesses in which the debtor has or has had an interest

List any business for which the debtor was an owner, partner, member, or otherwise a person in control within 6 years before filing this case. Include this information even if already listed in the Schedules.

- ☐ None

Business name address

Describe the nature of the business

Employer Identification number

Do not include Social Security number or ITIN.

Dates business existed

25.1. **Epirus Biopharmaceuticals
(Netherlands)
Yalelaan 46
3584 CM
Utrecht
NETHERLANDS**

BiotechnologyEIN: **58858466**From-To **9/9/2015 - 6/30/2016**

25.2. **Epirus Brasil Tecnologia Ltda
Avenida Bernardino de
Campos
98 - 6º Andar Paraíso
São Paulo 04004-040 BR
BRAZIL**

Biotechnology

EIN:

From-To **From 10/23/2013**

25.3. **Epirus Biopharmaceuticals
Ltd.
11 Old Jewry
7th Floor
London EC2R 8DU
UNITED KINGDOM**

Biotechnology

EIN:

From-To **From 1/25/2011**

25.4. **Epirus Pharmaceuticals
(Switzerland) Gmb
General Guisan- Strasse 6
6303 Zug
SWITZERLAND**

Biotechnology

EIN:

From-To **From 6/19/2013**

25.5. **Zalicus Pharmaceuticals
Ltd.
301 - 2389 Health Sciences
Mall
Vancouver British
Columbia V6T 1Z3
CANADA**

Biotechnology

EIN:

From-To **9/8/2010 - 10/1/2015**

Debtor **Epirus Biopharmaceuticals, Inc.**

Case number (if known)

Business name address	Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN.
25.6. Fourteen22, Inc. 836 Alvarado Street San Francisco, CA 94114	Biotechnology	Dates business existed EIN: From-To From January 2011
25.7. EB Sub, Inc. 699 Boylston Street Boston, MA 02116	Biotechnology	EIN: From-To From 7/15/2014
25.8. Cluster40 Therapeutics B.V. Yalelaan 46 3584 CM Utrecht NETHERLANDS	Biotechnology	EIN: From-To From 5/20/2016
25.9. Cluster152 Therapeutics B.V. Yalelaan 46 3584 CM Utrecht NETHERLANDS	Biotechnology	EIN: From-To From 5/20/2016
25.10. Cluster270 Therapeutics B.V. Yalelaan 46 3584 CM Utrecht NETHERLANDS	Biotechnology	EIN: From-To From 5/20/2016
25.11. Cluster279 Therapeutics B.V. Yalelaan 46 3584 CM Utrecht NETHERLANDS	Biotechnology	EIN: From-To From 5/20/2016

26. Books, records, and financial statements

26a. List all accountants and bookkeepers who maintained the debtor's books and records within 2 years before filing this case.

☐ None

Name and address	Date of service From-To
26a.1. Brandt, Remco M.P. Wim Schuhmacherhof 29 Almere, 1328 GJ NETHERLANDS	Through June 2016
26a.2. Ciszewski, Marek 907 Wild Ginger Trl West Chicago, IL 60185	January 2016 - June 2016
26a.3. Hopstaken, Leonardo Nederland - Senior Manager - Business P Deloitte Financial Advisory Services BV Gustav Mahlerlaan 2970 Amsterdam NETHERLANDS	Through June 2016

Debtor **Epirus Biopharmaceuticals, Inc.**

Case number (if known) _____

Name and address		Date of service From-To
26a.4.	Javelle, Boris Archstrasse 7 Thalwil, 8800 SWITZERLAND	Through June 2016
26a.5.	Markus, Robert 24 Acorn Dr Andover, MA 01810	March 2015 - July 2016
26a.6.	McNiff, Kyle 61 West St Westford, MA 01886	February 2016 - June 2016 as employee, later continued under Clinical Consulting agreement effective July 1, 2016 for an initial term expiring January 1, 2017.
26a.7.	Pardiwala, Bhavin 633 Boston Turnpike Shrewsbury, MA 01545	February 2014 - June 2016
26a.8.	Paul, Wanda 76 Freeman Street Auburndale, MA 02466	October 2015 - June 2016
26a.9.	Santostefano, Joanne 80 Paulies Pl, Unit 14 Tewksbury, MA 01876	February 2016 - June 2016
26a.10.	Scribner, Susan 319 Park Street North Reading, MA 01864	July 2014 - June 2016, later continued under Consulting Agreement effective May 23, 2016 for an initial term expiring on July 31, 2016
26a.11.	Shea, Thomas 8 Villa Drive Medway, MA 02053	June 2013 - June 2016
26a.12.	Wahlberg, Laura 307 Farm St Bellingham, MA 02019	June 2013 - May 2016 as employee, later continued under Consulting Agreement effective May 16, 2016 for an initial term expiring July 29, 2016

26b. List all firms or individuals who have audited, compiled, or reviewed debtor's books of account and records or prepared a financial statement within 2 years before filing this case.

☐ None

Debtor **Epirus Biopharmaceuticals, Inc.**

Case number (if known)

Name and address		Date of service From-To
26b.1.	216 Accountants B.V. Prinses Catharina-Amaliastraat 5 NETHERLANDS	Various
Name and address		Date of service From-To
26b.2.	Deloitte Financial Advisory Services BV Gustav Mahlerlaan 2970 NETHERLANDS	Various
Name and address		Date of service From-To
26b.3.	Daniel P. Young Deloitte Tax LLP 200 Berkely Street Boston, MA 02116	Various
Name and address		Date of service From-To
26b.4.	Ernst & Young Accountants LLP Booompjes 258 NETHERLANDS	Various
Name and address		Date of service From-To
26b.5.	Ernst & Young AG Aeschengraben 9 Basel SWITZERLAND	Various
Name and address		Date of service From-To
26b.6.	Ernst & Young LLP 200 Clarendon Street Boston, MA 02116	Various
Name and address		Date of service From-To
26b.7.	McGladrey LLP 5155 Paysphere Circle Chicago, IL 60674	Various

26c. List all firms or individuals who were in possession of the debtor's books of account and records when this case is filed.

☐ None

Name and address		If any books of account and records are unavailable, explain why
26c.1.	Markus, Robert 24 Acorn Dr Andover, MA 01810	
26c.2.	Ticktin, Robert 37 Marshall Rd Wellesley, MA 02482	
26c.3.	Ernst & Young LLP 200 Clarendon Street Boston, MA 02116	
26c.4.	DELOITTE TAX LLP PO BOX 844736 Dallas, TX 75284-4736	

Debtor **Epirus Biopharmaceuticals, Inc.**

Case number (if known)

Name and address	If any books of account and records are unavailable, explain why
26c.5. McGladrey LLP 5155 Paysphere Circle Chicago, IL 60674	
26c.6. Verdolino & Lowey PC Pine Brook Office Park 124 Washington St. Foxboro, MA 02035	
26c.7. InterTrust Services Switzerland AG Esther Notz` Director Corporate Services Alpenstrasse 15 6300 Zug SWITZERLAND	

26d. List all financial institutions, creditors, and other parties, including mercantile and trade agencies, to whom the debtor issued a financial statement within 2 years before filing this case.

☐ None

Name and address
26d.1. LEERINK PARTNERS LLC 1 FEDERAL STREET 37th Floor Boston, MA 02110
26d.2. HERCULES TECHNOLOGY GROWTH CAPITAL, INC. 400 Hamilton Avenue, Suite 310 Palo Alto, CA 94301
26d.3. U. S. Securities and Exchange Commission 100 F Street, NE Washington, DC 20549
26d.4. BTIG, LLC 825 Third Avenue 6th Floor Attention: Chief Operating Officer New York, NY 10022

27. Inventories

Have any inventories of the debtor's property been taken within 2 years before filing this case?

☒ No

☐ Yes. Give the details about the two most recent inventories.

Name of the person who supervised the taking of the inventory	Date of inventory	The dollar amount and basis (cost, market, or other basis) of each inventory
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28. List the debtor's officers, directors, managing members, general partners, members in control, controlling shareholders, or other people in control of the debtor at the time of the filing of this case.

Name	Address	Position and nature of any interest	% of interest, if any
Aurentz, Vincent	1105 Pinehurst Dr Chapel Hill, NC 27517	Senior Vice President, Chief Business Officer	Less than one percent beneficial interest

Debtor **Epirus Biopharmaceuticals, Inc.**

Case number (if known) _____

Name	Address	Position and nature of any interest	% of interest, if any
Markus, Robert	24 Acorn Dr Andover, MA 01810	Senior Director, Accounting Operations	Less than one percent beneficial interest
Name	Address	Position and nature of any interest	% of interest, if any
Ticktin, Robert	37 Marshall Rd Wellesley, MA 02482	Senior Vice President, General Counsel and Secretary	Less than one percent beneficial interest
Name	Address	Position and nature of any interest	% of interest, if any
Buchi, Kevin	TetraLogic Pharmaceuticals 343 Phoenixville Pike Malvern, PA 19355	Director	Less than one percent beneficial interest
Name	Address	Position and nature of any interest	% of interest, if any
Corrigan, M.D., Mark H.N.	389 Marlborough St. Boston, MA 02115	Director, Chairman of the Board	Less than one percent beneficial interest
Name	Address	Position and nature of any interest	% of interest, if any
Duyk, M.D., Ph.D., Geoffrey	TPG ART/TPG Biotech 345 California Street, Suite 3300 San Francisco, CA 94104	Director	Less than one percent beneficial interest
Name	Address	Position and nature of any interest	% of interest, if any
Fu, Ph.D., Daotian	Livzon Mabpharm, Inc. No.38 Chuangye Road North, Jinwan District,-Zhuhai, Guangdong 51909 CHINA	Director	Less than one percent beneficial interest
Name	Address	Position and nature of any interest	% of interest, if any
Hunter, M.D., William	Cardiome Pharma Corp 6190 Agronomy Rd, Suite 405 Vancouver, BC V6T 1Z3 CANADA	Director	Less than one percent beneficial interest
Name	Address	Position and nature of any interest	% of interest, if any
McHugh, Julie	Ironwood Pharma New Xellia Group and Trevena Pharmaceuti 1421 Parsons Lane Ambler, PA 19002	Director	Less than one percent beneficial interest
Name	Address	Position and nature of any interest	% of interest, if any
Rocklage, Ph.D., Scott	5 AM Ventures Waltham Woods Corporate Center 890 Winter Street, Suite 140 Waltham, MA 02451	Director	Less than one percent beneficial interest

29. Within 1 year before the filing of this case, did the debtor have officers, directors, managing members, general partners, members in control of the debtor, or shareholders in control of the debtor who no longer hold these positions?

Debtor **Epirus Biopharmaceuticals, Inc.**

Case number (if known) _____

- ☐ No
☒ Yes. Identify below.

Name	Address	Position and nature of any interest	Period during which position or interest was held
Munshi, Amit	17 Rustic View Lane Greenwich, CT 06830	President, Chief Executive Officer and Director, 1.9% beneficial interest	May 2012 - 5/6/2016
Name	Address	Position and nature of any interest	Period during which position or interest was held
Shea, Thomas	8 Villa Drive Medway, MA 02053	Senior Vice President, Chief Financial Officer and Treasurer, less than one percent beneficial interest	June 2013 - 6/30/2016
Name	Address	Position and nature of any interest	Period during which position or interest was held
Wyand, DVM, Ph.D., Michael	113 Maple St Stow, MA 01775	Senior Vice President, Chief Technical Officer, less than one percent beneficial interest	April 2015 - 6/30/2016

30. **Payments, distributions, or withdrawals credited or given to insiders**

Within 1 year before filing this case, did the debtor provide an insider with value in any form, including salary, other compensation, draws, bonuses, loans, credits on loans, stock redemptions, and options exercised?

- ☐ No
☒ Yes. Identify below.

	Name and address of recipient	Amount of money or description and value of property	Dates	Reason for providing the value
30.1	Aurentz, Vincent 1105 Pinehurst Dr Chapel Hill, NC 27517	\$20,717.65	June 2016	Gross wages
	Relationship to debtor Senior Vice President, Chief Business Officer			
30.2	Aurentz, Vincent 1105 Pinehurst Dr Chapel Hill, NC 27517	Option No: N002029 Option Date: 11/09/2015 Shares: 177,000 Price: \$5.2100 Plan: 2015 Type: NQ Accept Date: 04/26/2016	11/09/2015	Plan: 2015 Type: NQ
	Relationship to debtor Senior Vice President, Chief Business Officer			
30.3	Aurentz, Vincent 1105 Pinehurst Dr Chapel Hill, NC 27517	Option No: N002030 Option Date: 11/09/2015 Shares: 42,487 Price: \$5.2100 Plan: 2015 Type: NQ Accept Date: 04/26/2016	11/09/2015	Plan: 2015 Type: NQ
	Relationship to debtor Senior Vice President, Chief Business Officer			

Debtor **Epirus Biopharmaceuticals, Inc.**

Case number (if known)

	Name and address of recipient	Amount of money or description and value of property	Dates	Reason for providing the value
30.4	Aurentz, Vincent 1105 Pinehurst Dr Chapel Hill, NC 27517	Award No: N002099 Award Date: 05/27/2016 Shares: 230,000 Price: \$0.0000 Plan: 2015 Type: RSU Accept Date:	5/27/2016	Plan: 2015 Type: RSU
	Relationship to debtor Senior Vice President, Chief Business Officer			
30.5	Aurentz, Vincent 1105 Pinehurst Dr Chapel Hill, NC 27517	\$80,000.00	July 2016	Gross wages and Retention / Wind Down
	Relationship to debtor Senior Vice President, Chief Business Officer			
30.6	Munshi, Amit 17 Rustic View Lane Greenwich, CT 06830	\$600,752.81 wages plus \$79,880.85 local living expenses	July 2015 through June 2016	Gross payroll plus local living expenses
	Relationship to debtor President, Chief Executive Officer and Director			
30.7	Munshi, Amit 17 Rustic View Lane Greenwich, CT 06830	Option No: N001957 Option Date: 11/02/2015 Shares: 1 Price: \$5.5500 Plan: 2015 Type: ISO Accept Date: 01/27/2016	11/02/2015	Plan: 2015 Type: ISO
	Relationship to debtor President, Chief Executive Officer and Director			
30.8	Munshi, Amit 17 Rustic View Lane Greenwich, CT 06830	Option No: N001957 Option Date: 11/02/2015 Shares: 1 Price: \$5.5500 Plan: 2015 Type: ISO Accept Date: 01/27/2016	11/02/2015	Plan: 2015 Type: ISO
	Relationship to debtor President, Chief Executive Officer and Director			
30.9	Munshi, Amit 17 Rustic View Lane Greenwich, CT 06830	Option No: N002027 Option Date: 11/02/2015 Shares: 199,536 Price: \$5.5500 Plan: 2015 Type: NQ Accept Date: 01/27/2016	11/02/2015	Plan: 2015 Type: NQ
	Relationship to debtor President, Chief Executive Officer and Director			
30.10	Shea, Thomas 8 Villa Drive Medway, MA 02053	\$410,391.13	July 2015 through June 2016	Gross wages
	Relationship to debtor Senior Vice President, Chief Financial Officer and Treasurer			

Debtor **Epirus Biopharmaceuticals, Inc.**

Case number (if known)

	Name and address of recipient	Amount of money or description and value of property	Dates	Reason for providing the value
30.1 1.	Shea, Thomas 8 Villa Drive Medway, MA 02053	Option No: N001998 Option Date: 11/02/2015 Shares: 10,616 Price: \$5.5500 Plan: 2015 Type: ISO Accept Date: 12/08/2015	11/02/2015	Plan: 2015 Type: ISO
	Relationship to debtor Senior Vice President, Chief Financial Officer and Treasurer			
30.1 2.	Shea, Thomas 8 Villa Drive Medway, MA 02053	Option No: N002019 Option Date: 11/02/2015 Shares: 46,226 Price: \$5.5500 Plan: 2015 Type: NQ Accept Date: 12/08/2015	11/02/2015	Plan: 2015 Type: NQ
	Relationship to debtor Senior Vice President, Chief Financial Officer and Treasurer			
30.1 3.	Shea, Thomas 8 Villa Drive Medway, MA 02053	Award No: N002075 Award Date: 05/27/2016 Shares: 230,000 Price: \$0.0000 Plan: 2015 Type: RSU Accept Date:	5/27/2016	Plan: 2015 Type: RSU
	Relationship to debtor Senior Vice President, Chief Financial Officer and Treasurer			
30.1 4.	Ticktin, Robert 37 Marshall Rd Wellesley, MA 02482	\$396,525.10	July 2015 through June 2016	Gross wages
	Relationship to debtor Senior Vice President, General Counsel and Secretary			
30.1 5.	Ticktin, Robert 37 Marshall Rd Wellesley, MA 02482	Award No: N002080 Award Date: 05/27/2016 Shares: 230,000 Price: \$0.0000 Plan: 2015 Type: RSU Accept Date:	5/27/2015	Plan: 2015 Type: RSU
	Relationship to debtor Senior Vice President, General Counsel and Secretary			
30.1 6.	Ticktin, Robert 37 Marshall Rd Wellesley, MA 02482	Option No: N001951 Option Date: 11/02/2015 Shares: 9,048 Price: \$5.5500 Plan: 2015 Type: ISO Accept Date: 12/11/2015	11/02/2015	Plan: 2015 Type: ISO
	Relationship to debtor Senior Vice President, General Counsel and Secretary			

Debtor **Epirus Biopharmaceuticals, Inc.**

Case number (if known) _____

	Name and address of recipient	Amount of money or description and value of property	Dates	Reason for providing the value
30.1 7.	Ticktin, Robert 37 Marshall Rd Wellesley, MA 02482	Option No: N002024 Option Date: 11/02/2015 Shares: 30,426 Price: \$5.5500 Plan: 2015 Type: NQ Accept Date: 12/11/2015	11/02/2015	Plan: 2015 Type: NQ
	Relationship to debtor Senior Vice President, General Counsel and Secretary			
30.1 8.	Ticktin, Robert 37 Marshall Rd Wellesley, MA 02482	Option No: N002024 Option Date: 11/02/2015 Shares: 30,426 Price: \$5.5500 Plan: 2015 Type: NQ Accept Date: 12/11/2015	11/02/2015	Plan: 2015 Type: NQ
	Relationship to debtor Senior Vice President, General Counsel and Secretary			
30.1 9.	Ticktin, Robert 37 Marshall Rd Wellesley, MA 02482	\$74,752.25	July 2016	Gross wages and Retention / Wind Down
	Relationship to debtor Senior Vice President, General Counsel and Secretary			
30.2 0.	Wyand, DVM, Ph.D., Michael 113 Maple St Stow, MA 01775	\$400,861.55	July 2015 through June 2016	Gross wages
	Relationship to debtor Senior Vice President, Chief Technical Officer			
30.2 1.	Wyand, DVM, Ph.D., Michael 113 Maple St Stow, MA 01775	Award No: N002079 Award Date: 05/27/2016 Shares: 280,000 Price: \$0.0000 Plan: 2015 Type: RSU Accept Date:	5/27/2016	Plan: 2015 Type: RSU
	Relationship to debtor Senior Vice President, Chief Technical Officer			
30.2 2.	Wyand, DVM, Ph.D., Michael 113 Maple St Stow, MA 01775	Option No: N001954 Option Date: 11/02/2015 Shares: 9,213 Price: \$5.5500 Plan: 2015 Type: ISO Accept Date: 03/08/2016	11/02/2015	Plan: 2015 Type: ISO
	Relationship to debtor Senior Vice President, Chief Technical Officer			

Debtor **Epirus Biopharmaceuticals, Inc.**

Case number (if known)

	Name and address of recipient	Amount of money or description and value of property	Dates	Reason for providing the value
30.2 3.	Wyand, DVM, Ph.D., Michael 113 Maple St Stow, MA 01775	Option No: N001954 Option Date: 11/02/2015 Shares: 9,213 Price: \$5.5500 Plan: 2015 Type: ISO Accept Date: 03/08/2016	11/02/2015	Plan: 2015 Type: ISO
	Relationship to debtor Senior Vice President, Chief Technical Officer			
30.2 4.	Wyand, DVM, Ph.D., Michael 113 Maple St Stow, MA 01775	Option No: N002023 Option Date: 11/02/2015 Shares: 49,034 Price: \$5.5500 Plan: 2015 Type: NQ Accept Date: 03/08/2016	11/02/2015	Plan: 2015 Type: NQ
	Relationship to debtor Senior Vice President, Chief Technical Officer			

31. Within 6 years before filing this case, has the debtor been a member of any consolidated group for tax purposes?

- ☒ No
☐ Yes. Identify below.

Name of the parent corporation

Employer Identification number of the parent corporation

32. Within 6 years before filing this case, has the debtor as an employer been responsible for contributing to a pension fund?

- ☐ No
☒ Yes. Identify below.

Name of the parent corporation

Employer Identification number of the parent corporation

Epirus Biopharmaceuticals, Inc. 401 (k) Plan

EIN: 27-4642150

Epirus Biopharmaceuticals, Inc. 401 (k) Plan

EIN: 04-3514457

Zalicus Inc. 401(k) Plan

EIN: 04-3514457

Debtor Epirus Biopharmaceuticals, Inc.

Case number (if known) _____

Part 14: Signature and Declaration

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

I have examined the information in this *Statement of Financial Affairs* and any attachments and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on July 25, 2016

/s/ Robert Ticktin

Signature of individual signing on behalf of the debtor

Robert Ticktin

Printed name

Position or relationship to debtor SVP, General Counsel & Corporate Secretary

Are additional pages to *Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy* (Official Form 207) attached?

☐ No

☒ Yes

Vendor Name	Document Number	Vendor ID	Document Date	Document Amount
ADP	wire	ADP	6/24/2016	\$ 216.30
ADP	wire	ADP	6/29/2016	\$ 85,428.96
ADP	wire	ADP	7/1/2016	\$ 174.10
ADP	wire	ADP	7/14/2016	\$ 82,983.51
ADP	wire	ADP	7/21/2016	\$ 75,000.00
ADP	wire		7/21/2016	\$ 73,108.19
ADP Total				\$ 316,911.06
ALEX WALDRON	101877	WALDRON	5/9/2016	\$ 10,558.96
ALEX WALDRON Total				\$ 10,558.96
AMERICAN EXPRESS	15046		7/21/2016	\$ 12,045.93
AMERICAN EXPRESS Total				\$ 12,045.93
Barbara Chan	101844	CHAN	5/5/2016	\$ 38,697.00
Barbara Chan Total				\$ 38,697.00
BIOAGILYTIX LABS	101847	BIOAGILY	5/9/2016	\$ 9,709.11
BIOAGILYTIX LABS Total				\$ 9,709.11
Biobridges	101848	BIOBRIDGE	5/9/2016	\$ 5,775.00
Biobridges	101883	BIOBRIDGE	5/23/2016	\$ 5,862.00
Biobridges	101896	BIOBRIDGE	6/1/2016	\$ 5,550.00
Biobridges	101901	BIOBRIDGE	6/13/2016	\$ 18,741.00
Biobridges	101921	BIOBRIDGE	6/16/2016	\$ 12,444.00
Biobridges Total				\$ 48,372.00
BIOPROCESS TECH CONSULTANTS	101903	BIOPROCESS	6/13/2016	\$ 7,778.75
BIOPROCESS TECH CONSULTANTS Total				\$ 7,778.75
BOB JUFFRAS	101929	JUFFRAS	6/16/2016	\$ 11,571.89
BOB JUFFRAS Total				\$ 11,571.89
CFGH Holdings, LLC	101853	CORPFING	5/9/2016	\$ 78,408.75
CFGH Holdings, LLC Total				\$ 78,408.75
CHARLES LARANJEIRA	101874	LARANJEIRA	5/9/2016	\$ 12,113.73
CHARLES LARANJEIRA Total				\$ 12,113.73
CMS Derks Sar Busmann NV	wire		7/21/2016	\$ 15,467.51
CMS Derks Sar Busmann NV Total				\$ 15,467.51
CPT One Exeter Plaza LLC	101854	CPTONEEX	5/9/2016	\$ 48,823.82
CPT One Exeter Plaza LLC Total				\$ 48,823.82
DANFORTH ADVISORS	101897	DANFORTH	6/1/2016	\$ 13,616.00
DANFORTH ADVISORS Total				\$ 13,616.00
DELOITTE TAX LLP	101855	DELOITTE	5/9/2016	\$ 205,446.00
DELOITTE TAX LLP Total				\$ 205,446.00
EGNYTE, INC	101945	EGNYTE	6/29/2016	\$ 12,512.50
EGNYTE, INC Total				\$ 12,512.50
Ernst & Young LLP	101889	ERNSTUS	5/23/2016	\$ 91,970.50
Ernst & Young LLP Total				\$ 91,970.50
EVANS MANUFACTURING CONSULTANTS LLC	101888	EVANS	5/23/2016	\$ 15,000.00
EVANS MANUFACTURING CONSULTANTS LLC	101904	EVANS	6/13/2016	\$ 4,800.00
EVANS MANUFACTURING CONSULTANTS LLC Total				\$ 19,800.00
FLEISHMANHILLARD INC	101878	FLEISHMAN	5/10/2016	\$ 24,513.40
FLEISHMANHILLARD INC Total				\$ 24,513.40
Flynn Life Sciences Group Inc.	101860	FLYNNLIF	5/9/2016	\$ 2,072.00
Flynn Life Sciences Group Inc.	101890	FLYNNLIF	5/23/2016	\$ 1,904.00
Flynn Life Sciences Group Inc.	101902	FLYNNLIF	6/13/2016	\$ 7,952.00
Flynn Life Sciences Group Inc. Total				\$ 11,928.00
Hercules Capital	wire	HERCULES	7/13/2016	\$ 1,100,000.00
Hercules Capital	wire	HERCULES	7/14/2016	\$ 500,000.00
Hercules Capital Total				\$ 1,600,000.00
Jade Z Li	101931	LIJADE	6/16/2016	\$ 7,375.50
Jade Z Li Total				\$ 7,375.50

Vendor Name	Document Number	Vendor ID	Document Date	Document Amount
Jamestown Premier 245 First LL	101849	CAMBSCIE	5/9/2016	\$ 141,020.28
Jamestown Premier 245 First LL Total				\$ 141,020.28
Jeffrey J Kagy	101915	KAGYJ	6/15/2016	\$ 7,783.47
Jeffrey J Kagy	101930	KAGYJ	6/16/2016	\$ 3,342.34
Jeffrey J Kagy Total				\$ 11,125.81
JESSICA JOHNSON	101873	JOHNSONJ	5/9/2016	\$ 7,426.08
JESSICA JOHNSON	101916	JOHNSONJ	6/16/2016	\$ 3,490.00
JESSICA JOHNSON Total				\$ 10,916.08
Mark W Melville	101934	MELVILLE	6/16/2016	\$ 11,600.72
Mark W Melville Total				\$ 11,600.72
Markus, Robert L	101932	MARKUS	6/16/2016	\$ 10,539.88
Markus, Robert L	101946	MARKUS	6/29/2016	\$ 5,585.20
Markus, Robert L	eft		7/15/2016	\$ 15,356.25
Markus, Robert L			7/22/2016	\$ 30,712.50
Markus, Robert L Total				\$ 62,193.83
Mary Dibiase		DIBIASE	6/16/2016	\$ 11,384.15
Mary Dibiase Total				\$ 11,384.15
Merrill Communications LLC	101866	MERRCOMM	5/9/2016	\$ 6,120.90
Merrill Communications LLC	wire	MERRILLCOMM	7/1/2016	\$ 30,000.10
Merrill Communications LLC	wire		7/21/2016	\$ 1,000.00
Merrill Communications LLC Total				\$ 37,121.00
MINTZ LEVIN P.C.	101893	MINTZLEV	5/23/2016	\$ 68,036.16
MINTZ LEVIN P.C.	101910	MINTZLEV	6/13/2016	\$ 190,954.53
MINTZ LEVIN P.C.	101924	MINTZLEV	6/16/2016	\$ 100,000.00
MINTZ LEVIN P.C.	wire	MINTZ	7/7/2016	\$ 60,000.00
MINTZ LEVIN P.C.	wire		7/22/2016	\$ 25,000.00
MINTZ LEVIN P.C. Total				\$ 443,990.69
Sonit Tomar	101941	TOMARS	6/16/2016	\$ 7,818.26
Sonit Tomar Total				\$ 7,818.26
Sullivan Insurance Group Inc.	101868	SULLIVAN	5/9/2016	\$ 5,203.00
Sullivan Insurance Group Inc.	Wire Transfer	SULLIVAN	6/16/2016	\$ 1,258,000.00
Sullivan Insurance Group Inc. Total				\$ 1,263,203.00
Suman Patel	101937	PATELS	6/16/2016	\$ 7,686.81
Suman Patel Total				\$ 7,686.81
THRIVE NETWORKS, INC	101870	THRIVE	5/9/2016	\$ 8,300.14
THRIVE NETWORKS, INC Total				\$ 8,300.14
Wahlberg, Laura	101942	WAHLBERGL	6/16/2016	\$ 3,714.48
Wahlberg, Laura	eft		7/15/2016	\$ 3,000.00
Wahlberg, Laura Total				\$ 6,714.48
Wahlberg, Meredith C	101943	WAHLBERGM	6/16/2016	\$ 3,206.30
Wahlberg, Meredith C	101948	WAHLBERGM	6/29/2016	\$ 1,569.99
Wahlberg, Meredith C	eft		7/15/2016	\$ 4,166.67
Wahlberg, Meredith C	eft		7/22/2016	\$ 8,333.34
Wahlberg, Meredith C Total				\$ 17,276.30
WuXi AppTec	101899	WUXI	6/1/2016	\$ 20,400.00
WuXi AppTec Total				\$ 20,400.00
Grand Total				\$ 4,658,371.96

Vendor Name	Document Number	Vendor ID	Document Date	Document Amount
DAOTIAN FU-(wire)	0001173	DAOTIANF	8/13/2015	\$ 9,166.67
DAOTIAN FU-(wire)	0001523	DAOTIANF	10/28/2015	\$ 10,000.00
DAOTIAN FU-(wire)	0001634	DAOTIANF	11/10/2015	\$ 6,340.70
DAOTIAN FU-(wire) Total				\$ 25,507.37
GEOFFREY DUYK	100845	DUYKG	8/13/2015	\$ 10,958.33
GEOFFREY DUYK	101117	DUYKG	10/27/2015	\$ 11,875.00
GEOFFREY DUYK	101550	DUYKG	1/7/2016	\$ 11,875.00
GEOFFREY DUYK	101824	DUYKG	4/14/2016	\$ 11,875.00
GEOFFREY DUYK Total				\$ 46,583.33
JULIE MCHUGH	100852	MCHUGHJ	8/13/2015	\$ 11,458.33
JULIE MCHUGH	101131	MCHUGHJ	10/27/2015	\$ 13,125.00
JULIE MCHUGH	101179	MCHUGHJ	11/6/2015	\$ 857.89
JULIE MCHUGH	101491	MCHUGHJ	12/21/2015	\$ 970.66
JULIE MCHUGH	101552	MCHUGHJ	1/7/2016	\$ 13,125.00
JULIE MCHUGH	101828	MCHUGHJ	4/14/2016	\$ 13,125.00
JULIE MCHUGH Total				\$ 52,661.88
Kevin Buchi	100838	BUCHIK	8/13/2015	\$ 12,916.67
Kevin Buchi	101100	BUCHIK	10/27/2015	\$ 13,750.00
Kevin Buchi	101553	BUCHIK	1/7/2016	\$ 13,750.00
Kevin Buchi	101841	BUCHIK	4/28/2016	\$ 831.58
Kevin Buchi Total				\$ 41,248.25
MARK CORRIGAN	100842	CORRIGAN	8/13/2015	\$ 15,000.00
MARK CORRIGAN	100959	CORRIGAN	9/3/2015	\$ 2,150.00
MARK CORRIGAN	101110	CORRIGAN	10/27/2015	\$ 15,000.00
MARK CORRIGAN	101479	CORRIGAN	12/21/2015	\$ 1,273.45
MARK CORRIGAN	101551	CORRIGAN	1/7/2016	\$ 15,000.00
MARK CORRIGAN	101823	CORRIGAN	4/14/2016	\$ 15,000.00
MARK CORRIGAN Total				\$ 63,423.45
Michael Wyand	101944	WYANDM	6/16/2016	\$ 12,319.75
Michael Wyand Total				\$ 12,319.75
Robert Ticktin	101940	TICKTINR	6/16/2016	\$ 18,277.38
Robert Ticktin	101947	TICKTINR	6/29/2016	\$ 8,931.31
Robert Ticktin Total				\$ 27,208.69
SCOTT ROCKLAGE	101086	ROCKLAGES	10/8/2015	\$ 11,666.67
SCOTT ROCKLAGE	101142	ROCKLAGES	10/27/2015	\$ 12,500.00
SCOTT ROCKLAGE	101554	ROCKLAGES	1/7/2016	\$ 12,500.00
SCOTT ROCKLAGE	101830	ROCKLAGES	4/14/2016	\$ 12,500.00
SCOTT ROCKLAGE Total				\$ 49,166.67
Thomas A Shea	101939	SHEAT	6/16/2016	\$ 18,123.69
Thomas A Shea Total				\$ 18,123.69
VINCENT AURENTZ	0002033	AURENTZ	12/9/2015	\$ 73,907.12
VINCENT AURENTZ	0002550	AURENTZ	12/29/2015	\$ 27,002.60
VINCENT AURENTZ	101927	AURENTZ	6/16/2016	\$ 12,861.48
VINCENT AURENTZ	101949	AURENTZ	6/29/2016	\$ 8,273.48
VINCENT AURENTZ Total				\$ 122,044.68
WILLIAM HUNTER	EFT	HUNTERW	10/13/2015	\$ 11,102.26
WILLIAM HUNTER	101172	HUNTERW	11/6/2015	\$ 3,730.72
WILLIAM HUNTER	15049		7/21/2016	\$ 2,462.20
WILLIAM HUNTER Total				\$ 17,295.18
Grand Total				\$ 475,582.94

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**United States Bankruptcy Court
District of Massachusetts**

In re **Epirus Biopharmaceuticals, Inc.**

Debtor(s)

Case No. _____

Chapter

7

VERIFICATION OF CREDITOR MATRIX

I, the SVP, General Counsel & Corporate Secretary of the corporation named as the debtor in this case, hereby verify that the attached list of creditors is true and correct to the best of my knowledge.

Date: **July 25, 2016**

/s/ Robert Ticktin

Robert Ticktin/SVP, General Counsel & Corporate Secretary
Signer/Title